Table of Contents

This package contains information on the Healthcare Cost and Utilization Project (HCUP, pronounced "H-Cup") Central Distributor. It provides details about the HCUP State databases available through the HCUP Central Distributor and includes an application for these databases.

DESCRIPTION OF HEALTHCARE COST AND UTILIZATION PROJECT (HCUP)

A Federal-State-Industry Partnership in Health Data

The Healthcare Cost and Utilization Project (HCUP) is a family of healthcare databases and related software tools and products developed through a Federal-State-industry partnership and sponsored by the Agency for Healthcare Research and Quality (AHRQ). HCUP databases bring together the data collection efforts of state data organizations, hospital associations, private data organizations, and the Federal government to create a national information resource of patient-level health care data. HCUP includes the largest collection of longitudinal hospital care data in the United States, with all-payer, encounter-level information beginning in 1988. These databases enable research on a broad range of health policy issues, including cost and quality of health services, medical practice patterns, access to health care programs, and outcomes of treatments at the national, state and local market levels.

All of the HCUP databases contain patient-level information for either inpatient or ambulatory surgery stays in a uniform format while protecting patient privacy. The Nationwide Inpatient Sample (NIS) includes inpatient data from a nationwide sample of approximately 1000 hospitals. The State Inpatient Databases (SID) cover inpatient care in 29 States and represent more than eighty percent of all U.S. hospital discharges. The State Ambulatory Surgery Databases (SASD) cover ambulatory surgery care in 15 states. The Kids' Inpatient Database (KID) contains data from a nationwide sample of community hospitals covering inpatient care for discharges that had an age at admission of 18 years or less.

HCUP's objectives are to: (1) obtain data from statewide information sources, (2) design and develop a multi-State health care database for health services research and health policy analysis, and (3) make these data available to a broad set of public and private users.

The uniform data in HCUP make possible comparative studies of health care services and the use and cost of hospital care. Studies include the effects of market forces on hospitals and the care they provide, variations in medical practice, the effectiveness of medical technology and treatments, and use of services by special populations.

Many of the Data Organizations participating in HCUP have agreed to release their state-specific files through the HCUP Central Distributor under the auspices of AHRQ. The individual state databases are in the same HCUP uniform format. In general, they represent 100% of records processed by AHRQ. However, the participating Data Organizations control the release of specific data elements. AHRQ is currently assisting the Data Organizations in the release of the 1995-2000 SID and the 1997-2000 SASD.

This package contains information on the HCUP SID and SASD databases available through the HCUP Central Distributor. Other HCUP databases available through the HCUP Central Distributor include:

- The 1997 KID,
- The 1988 – 2000 NIS.

For more information on the HCUP databases and related products, please visit the AHRQ Web site at the following URL: http://www.AHRQ.gov/data/hcup/.

DESCRIPTION OF STATE INPATIENT DATABASES (SID)

Overview

The Healthcare Cost and Utilization Project (HCUP) State Inpatient Databases (SID) consist of individual data files from Data Organizations in 29 participating States. In general, the SID contain the universe of each state's hospital inpatient discharge records. They are composed of annual, state-specific files that share a common structure and common data elements. Most data elements are coded in a uniform format across all states. In addition to the core set of uniform data elements, the SID include state-specific data elements or data elements available only for a limited number of states. The uniform format of the SID helps facilitate cross-state comparisons. In addition, the SID are well suited for research that requires complete enumeration of hospitals and discharges within market areas or states.

How the HCUP SID Differ from State Data Files

The SID available through the HCUP Central Distributor differ from the data files available from the Data Organizations in the following ways:

* data elements available on the files, and

* coding of data elements.

Because the Data Organizations dictate the data elements that may be released through the HCUP Central Distributor, the data elements on the SID are a subset of the data collected by the corresponding Data Organizations. HCUP uniform coding is used on most data elements on the SID. A few state-specific data elements retain the original values provided by the respective Data Organizations.

Types of Hospitals Included

The hospitals included in the SID depend on the information provided by the Data Organizations. Most state government data organizations provide information on all acute care hospitals in the respective state. Private data organizations are often restricted to member hospitals and may not provide information on all hospitals in their state.

Identifying Hospitals

Up to three hospital identifiers are on the SID:

* Some Data Organizations allow the original hospital identifier (DSHOSPID) to be included on the SID. If available on the SID, this identifier is coded for all hospitals and may distinguish different units within a hospital.

* Some Data Organizations allow the AHA hospital identifier (AHAID) to be included on the SID. This variable enables the SID to be linked to the AHA Annual Survey of Hospitals that contains information on hospital characteristics. The AHA hospital identifier is coded for most hospitals. The AHA hospital identifier is missing if the hospital is not registered with the AHA or the source-provided information could not be matched to the AHA.

* Some Data Organizations allow the HCUP-specific hospital identifier (HOSPID) to be included on the SID. HOSPID is coded for all hospitals with a nonmissing AHA hospital identifier.

Not all Data Organizations permit all three of the hospital identifiers on the SID.

The availability of data elements differs by Data Organization. The following descriptions of the HCUP SID are provided:

•   SID File Overviews (page 3)

•   SID Hospitals and Record Counts (page 5)

•   SID Data Element Descriptions and Availability by State (page 9)

SID File Overviews

This section lists all states releasing their SID through the HCUP Central Distributor and provides details about the source of data provided for HCUP.

Arizona

The Arizona SID files were constructed from the Arizona Hospital Inpatient Database from the Section of Cost Report and Review of the Arizona Department of Health Services. Arizona supplied discharge abstract data for inpatient stays in acute care and rehabilitation hospitals with more than 50 beds.

California

The California SID files were constructed from the confidential files received from the Office of Statewide Health Planning and Development (OSHPD). California supplied discharge abstract data for inpatient stays in general acute care hospitals, acute psychiatric hospitals, chemical dependency recovery hospitals, psychiatric health facilities, and state operated hospitals.

Colorado

The Colorado SID files were constructed from the Discharge Data Program (DDP) files. The Colorado Health and Hospital Association supplied discharge abstract data from Colorado acute care hospitals, including swing beds and distinct part units.

Florida

The Florida SID files were constructed from the Florida Hospital Discharge Data Confidential Information received from the Florida Agency for Health Care Administration. The Florida confidential inpatient files consist of discharge abstract data from nonfederal Florida hospitals.

Iowa

The Iowa SID files were constructed from the Iowa Hospital Association's Statewide Database. Iowa supplied discharge abstract data and some uniform bills for acute inpatient discharges from member hospitals.

Kentucky

The Kentucky SID files were constructed from inpatient discharge files received from the Kentucky Cabinet for Health Services, Department for Public Health. Kentucky collects data from acute care licensed hospitals in Kentucky.

Maine

The Maine SID files were constructed from the Maine Health Data Organization inpatient discharge files. Discharge data from general acute care hospitals, including psychiatric and rehabilitation hospitals, are included.

Maryland

The Maryland SID files were constructed from the confidential files received from the State of Maryland's Health Services Cost Review Commission (HSCRC). Demographic and utilization data for inpatient stays in Maryland acute care hospitals were supplied by HSCRC in the Uniform Hospital Discharge Abstract Data Set.

Massachusetts

The Massachusetts SID files were constructed from the Massachusetts confidential Case Mix Database files received from the Massachusetts Division of Health Care Finance and Policy. Massachusetts supplied discharge abstract data for inpatient stays from general acute care hospitals in Massachusetts.

New Jersey

The New Jersey SID files were received from the New Jersey Department of Health and Senior Services. The New Jersey files consist of discharge abstract data for all inpatient and same-day stays. New Jersey supplied discharge abstract data for inpatient stays from all New Jersey hospitals. Ambulatory surgery records, which were also included in the original files, were excluded from the HCUP inpatient files.

New York

The New York SID files were constructed from the New York State Department of Health's Statewide Planning and Research Cooperative System (SPARCS) Master File. The New York files contain inpatient discharges from all hospitals in the state, excluding long-term care units of short-term hospitals and Federal hospitals.

North Carolina

The HCUP North Carolina inpatient files were constructed from hospital discharge files received from the North Carolina Department of Health and Human Services. The North Carolina Department of Health and Human Services collects inpatient data from acute care licensed hospitals, rehabilitation facilities, psychiatric facilities and substance abuse facilities in North Carolina. Four state psychiatric hospitals are not included.

Oregon

The 1995 Oregon SID files were constructed from the Office for Oregon Health Plan Policy and Research discharge files. Beginning in 1996, the HCUP Oregon SID files were constructed from discharge files supplied by the Oregon Association of Hospitals and Health Systems. The Oregon files consist of discharge abstract data for inpatient stays from member hospitals.

South Carolina

The South Carolina SID files were constructed from confidential data files supplied by the South Carolina State Budget and Control Board. The data include inpatient stays from South Carolina acute care hospitals.

Utah

The Utah SID files were constructed from inpatient files received from Office of Health Care Statistics, Utah Department of Health. These data include inpatient discharge data from Utah general acute care and some specialty facilities (e.g., children's hospitals, rehabilitation hospitals, state psychiatric facilities) associated with acute care hospitals.

Washington

The Washington SID files were constructed from the Washington Comprehensive Hospital Abstract Reporting System (CHARS) received from the Washington State Department of Health. Washington supplied uniform bills for inpatient stays from acute care units, alcohol dependency units, bone marrow transplant units, extended care units, psychiatric units, rehabilitation units, group health units, and swing bed units.

West Virginia

The West Virginia Health Care Authority collects data from acute care licensed hospitals in West Virginia, including critical access hospitals. Freestanding psychiatric and rehabilitation hospitals are not included. Not all hospitals report a full calendar year of data.

Wisconsin

The Wisconsin SID files were constructed from confidential inpatient files received from the Wisconsin Department of Health and Family Services. Wisconsin supplied discharge data abstracts and uniform bills for nonfederal Wisconsin hospitals.

SID Hospitals and Record Counts

The following tables show the number of hospitals in the 1997-2000 SID and break them down by:

- The number of community hospitals.
- The number of non-community hospitals.
- The number of community hospitals not in the SID.

The only reason a hospital is not included in the SID is if the Data Organization did not supply the necessary data.

Information contained in the 1997-2000 AHA Annual Survey of Hospitals was used to determine if a hospital was a community hospital. Community hospitals, as defined by AHA, include "all nonfederal, short-term, general and other specialty hospitals, excluding hospital units of institutions." Included among community hospitals are academic medical centers and specialty hospitals such as obstetrics, gynecology, ear nose throat, short-term rehabilitation, orthopedic, and pediatric hospitals. Non-community hospitals include federal hospitals (Veterans Administration, Department of Defense, and Indian Health Service hospitals), long-term hospitals, psychiatric hospitals, alcohol/chemical dependency treatment facilities and hospitals units within institutions such as prisons.

The SID may include other hospitals that could not be categorized as community or non-community hospitals because these hospitals could not be matched with AHA information. This occurs when a hospital closed in a previous year or when the hospital does not report to the AHA.

State	Number of Discharges In the SID by Year [1]					
	1995	1996	1997	1998	1999	2000
AZ	476,833	493,005	516,064	538,585	560,237	603,911
CA	3,629,322	3,632,167	3,685,706	3,725,422	3,775,711	3,816,887
CO	387,772	392,379	402,615	414,367	427,941	441,943
FL	1,899,586	1,931,135	2,004,247	2,095,009	2,151,589	2,232,533
IA	358,667	357,099	355,502	353,365	353,393	361,493
KY	Not Available	Not Available	Not Available	Not Available	Not Available	537,006
MA	775,216	759,869	763,363	777,922	777,429	788,501
MD	625,037	620,796	610,343	614,788	626,955	644,386
ME	Not Available	Not Available	Not Available	Not Available	158,294	161,355
NC	Not Available	Not Available	Not Available	Not Available	Not Available	1,013,444
NJ	1,079,678	1,070,992	1,070,524	1,082,746	1,091,947	1,119,445
NY	2,530,206	2,469,668	2,432,632	2,448,148	2,429,753	2,453,206
OR	350,263	369,814	376,069	381,134	386,485	350,747
SC	440,315	446,156	461,308	483,202	498,955	517,018
UT	Not Available	Not Available	225,487	232,476	233,328	241,450
WA	523,711	523,672	536,739	540,421	549,696	573,978
WI	622,933	614,102	610,962	611,307	621,235	635,166
WV	Not Available	Not Available	Not Available	Not Available	Not Available	279,621

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[1] Includes all discharges in the HCUP SID, including non-community hospitals where applicable.

	Number of Hospitals in 1997		
State	Community Hospitals in the SID	Non-Community Hospitals in the SID	Community Hospitals Not Included in the SID
AZ	62	2	2
CA	411	42	4
CO	66	3	1
FL	198	32	12
IA	115	2	0
KY	Not Available	Not Available	Not Available
MA	73	1	11
MD	51	1	0
ME	Not Available	Not Available	Not Available
NC	Not Available	Not Available	Not Available
NJ	78	0	7
NY	222	4	3
OR	59	2	2
SC	60	0	5
UT	40	7	1
WA	88	3	1
WI	124	16	0
WV	Not Available	Not Available	Not Available

	Number of Hospitals in 1998		
State	Community Hospitals in the SID	Non-Community Hospitals in the SID	Community Hospitals Not Included in the SID
AZ	63	2	2
CA	399	39	8
CO	67	2	2
FL	195	32	12
IA	116	1	0
KY	Not Available	Not Available	Not Available
MA	70	2	12
MD	51	1	0
ME	Not Available	Not Available	Not Available
NC	Not Available	Not Available	Not Available
NJ	77	0	6
NY	221	5	1
OR	59	2	1
SC	60	0	6
UT	41	7	1
WA	86	4	1
WI	123	16	0
WV	Not Available	Not Available	Not Available

State	Number of Hospitals in 1999		
	Community Hospitals in the SID	Non-Community Hospitals in the SID	Community Hospitals **Not** Included in the SID
AZ	59	1	3
CA	391	41	6
CO	66	3	1
FL	193	24	12
IA	115	1	0
KY	Not Available	Not Available	Not Available
MA	68	2	11
MD	48	1	1
ME	36	3	1
NC	Not Available	Not Available	Not Available
NJ	75	1	6
NY	217	4	1
OR	58	2	1
SC	60	1	5
UT	41	5	1
WA	86	4	1
WI	123	16	0
WV	Not Available	Not Available	Not Available

State	Number of Hospitals in 2000		
	Community Hospitals in the SID	Non-Community Hospitals in the SID	Community Hospitals **Not** Included in the SID
AZ	55	2	7
CA	385	38	5
CO	67	2	2
FL	190	20	14
IA	115	1	0
KY	97	4	8
MA	68	2	12
MD	48	1	1
ME	37	2	0
NC	111	8	3
NJ	75	1	6
NY	216	4	0
OR	58	0	1
SC	60	1	5
UT	41	5	1
WA	84	5	1
WI	120	17	1
WV	54	0	4

SID Data Element Descriptions and Availability by State

The following table (page 10) describes the HCUP SID data elements. Not all HCUP SID data elements are available from all Data Organizations. The availability columns refer to the states using the state postal code (e.g., CA for California, CO for Colorado). Cells marked with an "x" indicate that the data element is available for that state. Blank cells indicate that the data element is not available for that state. More detailed descriptions and coding information of the HCUP SID data elements accompany the purchase of the data files.

In some cases, multiple data elements of the same type are available (e.g., principal and secondary diagnoses). The small "n" in the data element name (e.g., DXn) indicates that there is more than one data element of that type. The number of data elements available is specified in the state-specific cell. For example, the cell for diagnoses (i.e., DXn) identifies the number of available diagnoses. CA has 30 diagnoses: 1 principal diagnosis and 29 secondary diagnoses. Not all diagnoses are coded on all records.

SID Data Elements																		
Availability by State																		
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
ADATE Admission Date. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by AMONTH and AYEAR beginning in 1998.	Prior to 1998		Prior to 1998		Prior to 1998		Prior to 1998				Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	
ADAYWK Admission Day of Week. Discontinued beginning in 1998. Value Description 1 Sunday 2 Monday 3 Tuesday 4 Wednesday 5 Thursday 6 Friday 7 Saturday	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
ADRG All Patient Refined DRG. Preserved as provided by the Data Organization.		1995-1998				x			x						x			

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
ADRGSEV All Patient Refined DRG Severity Level. The complexity subclass associated with the data element ADRG. Values range from 1 (minor) to 4 (extreme). Preserved as provided by the Data Organization.		1995-1998													x			
AGE Age in Years at Admission. Calculated as the difference between the admission date and date of birth before these dates are masked.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
AGEDAY Age in Days at Admission. Only coded when patient is less than one year old. Calculated as the difference between the admission date and date of birth before these dates are masked.	x	x	x		x	x	x	x	x	x	x	x	x	Prior to 2000	x	x	x	x
AGEMONTH Age in Months. Only coded when patient is less than 11 years old. Calculated as the difference between the admission date and date of birth before these dates are masked. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998		Began in 1998	x	Began in 1998	Began in 1998	x	x	Began in 1998	Began in 1998	Began in 1998		Began in 1998	Began in 1998	Began in 1998	x
AHAID AHA Hospital Identification Number. This 7-digit number is assigned by the American Hospital Association (AHA) and included on their AHA Annual Survey of Hospitals.	x	x	x	x	x	x	x	x	x	x	x	x	x		x	x	x	x
AMDC All Patient Refined MDC. Preserved as provided by the Data Organization.		1997-1998							x									

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
AMONTH Admission Month. Values ranges from 1 to 12.	x	x	x		x	x	x		x	x	x	x	x	x	x	x	x	x
ANESTH Method of Anesthesia. Value Description 0 No anesthesia 10 Local anesthesia 20 General anesthesia 30 Regional anesthesia 40 Other anesthesia												Began in 1998						
ASCHED Scheduled vs. Unscheduled Admission. Value Description 0 Unscheduled Admission 1 Scheduled Admission		Began in 1997										Began in 1998						
ASOURCE Admission Source. Value Description 1 Emergency department 2 Another hospital 3 Other health facility including long term care 4 Court/Law enforcement 5 Routine, birth and other	x	x	x	x	x	x	x	x	Began in 2000	x	x	x	x	x	x	x	x	x

SID Data Elements																		
	Availability by State																	
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
ASOURCE_X Admission source, as received from source. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x	Began in 1998	Began in 1998	Began in 2000	x	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x
ATYPE Admission Type. Value Description 1 Emergency 2 Urgent 3 Elective 4 Newborn 5 Delivery (Coded in 1995-1997 data only) 6 Other	x		x	x	x	x	x	x	Began in 2000	x	x	x	x	x	x	x	x	x
AWEEKEND Admission day is on a weekend. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x	Began in 1998	Began in 1998	x	x	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x
AYEAR Admission year. Four-digit year. Added beginning in 1998.	Began in 1998		Began in 1998		Began in 1998	x	Began in 1998		x	x		Began in 1998	Began in 1998		Began in 1998	Began in 1998	Began in 1998	x
BLOOD Pints of blood furnished to the patient. Added beginning in 1998.												Began in 1998						
BMONTH Birth month. Values range from 1 to 12. Added beginning in 1998.	Began in 1998				Began in 1998	x				x	Began in 1998	Began in 1998			Began in 1998		Began in 1998	x

SID Data Elements																	
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
BWT Birth Weight. BWT is coded in grams.	x		x			x	Began in 1997	x	x	x	x	x						
BYEAR Birth year. Four-digit year. Added beginning in 1998.	Began in 1998				Began in 1998	x				x		Began in 1998	Began in 1998		Began in 1998		Began in 1998	x
CHGn Charge Detail. The number and definitions of the detailed charges are determined by the Data Organization.	63		5	24	Varies by year (1–23)	55	Varies by year (30-110)	31	Varies by year (1-34)	10	35	25	10	Varies by year (52-78)	2	40		57
DaysBurnUnit Days in the burn care unit, as received from source. Added beginning in 1998.								Began in 1998										
DaysCCU Days in the coronary care unit, as received from source. Added beginning in 1998.								Began in 1998										
DaysICU Days in the intensive care unit, as received from source. Added beginning in 1998.								Began in 1998						Began in 2000				
DaysNICU Days in the neonatal care unit, as received from source. Added beginning in 1998.								Began in 1998										
DaysPICU Days in the pediatric care unit, as received from source. Added beginning in 1998.								Began in 1998										

SID Data Elements																	
Data Element Name and Description	**Availability by State**																
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
DaysShockUnit Days in the shock trauma unit, as received from source. Added beginning in 1998.								Began in 1998										
DCCHPRn The Clinical Classifications Software (CCS), formerly known as Clinical Classifications for Health Policy Research (CCHPR), was developed by AHRQ for ICD-9-CM diagnoses. A classification code (DCCHPRn) is assigned during HCUP processing for each diagnosis (DXn). Values range from 1-260. Renamed DXCCSn beginning 1998.	11 Prior to 1998	30 Prior to 1998	15 Prior to 1998	10 Prior to 1998	10 Prior to 1998		10 Prior to 1998	16 Prior to 1998			10 Prior to 1998	17 Prior to 1998	10 Prior to 1998	10 Prior to 1998	10 Prior to 1998	10 Prior to 1998	10 Prior to 1998	
DDATE Discharge Date. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by DMONTH and YEAR beginning in 1998.	Prior to 1998		Prior to 1998		Prior to 1998		Prior to 1998					Prior to 1998	Prior to 1998		Prior to 1998		Prior to 1998	
DIED Died During Hospitalization. This data element was created during HCUP processing using the disposition of the patient at discharge (DISP). Value Description 0 Did not die 1 Died	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
DISP Disposition of Patient at Discharge. Discontinued beginning 1998. Value / Description 1 Routine 2 Short-term Hospital 3 Skilled Nursing Facility 4 Intermediate Care Facility 5 Another Type of Facility 7 Against Medical Advice 20 Died	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
DISP_X Disposition of patient, as received from source. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	X	Began in 1998	Began in 1998	X	X	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	X
DISPUB92 Disposition of patient, UB92 coding. Added beginning in 1998.	Began in 1998		Began in 1998	Began in 1998	Began in 1998	X	Began in 1998		X	X	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	X
DISPUniform Disposition of patient, uniform coding. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	X	Began in 1998	Began in 1998	X	X	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	X
DMONTH Discharge month. Values range from 1 to 12. Added beginning in 1998.	Began in 1998		Began in 1998		Began in 1998	X	Began in 1998		X	X		Began in 1998	Began in 1998		Began in 1998		Began in 1998	X

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
DNR Do not resuscitate. Added beginning in 1998. Value Description 0 No "Do not resuscitate" order 1 "Do not resuscitate" order		Began in 1999									Began in 1998							
DOB Date of Birth. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by BMONTH and BYEAR beginning in 1998.	Prior to 1998				Prior to 1998							Prior to 1998	Prior to 1998		Prior to 1998		Prior to 1998	
DQTR Discharge Quarter. Derived from discharge date (DDATE). Value Description 1 First Quarter (Jan. - Mar.) 2 Second Quarter (Apr. - June) 3 Third Quarter (July - Sep.) 4 Fourth Quarter (Oct. - Dec.) 0 Missing or Invalid	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
DRG Diagnosis Related Group (DRG). DRG is appropriate for the date of discharge and is assigned by the Health Care Finance Administration (HCFA) DRG Grouper algorithm during HCUP processing. The applicable DRG version is available in the data element DRGVER.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
DRG10 Diagnosis Related Group (DRG), Version 10. During HCUP processing, diagnosis and procedure codes are first translated into codes that were in effect during fiscal year 1992, and then Version 10 of the HCFA DRG Grouper algorithm is applied. Discontinued beginning in 2000.	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000		Prior to 2000	Prior to 2000	Prior to 2000		Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	
DRG18 DRG, Version 18. During HCUP processing, diagnosis and procedure codes are first translated into codes that were in effect during fiscal year 2000, and then Version 18 of the HCFA DRG Grouper algorithm is applied. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x	Began in 1998	Began in 1998	x	x	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x

SID Data Elements																	
	Availability by State																
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
DRGVER DRG Grouper Version in Use on Discharge Date. Value Description 12 12th revision, effective 10/1/94 to 9/30/95 13 13th revision, effective 10/1/95 to 9/30/96 14 14th revision, effective 10/1/96 to 9/30/97 15 15th revision, effective 10/1/97 to 9/30/98	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
DSHOSPID Hospital Identifier Provided by the Data Organization.	x	x	x	x	x	x	x	x	x	x	x	x	x		x	x	x	x
DSNDX Total Number of Diagnosis Fields Provided by the Data Organization. For example, DSNDX may equal 10 because the Data Organization provides for a principal and 9 secondary diagnoses. However, the number of diagnoses coded on the discharge will vary from 0 to 10. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

SID Data Elements																	
Data Element Name and Description	**Availability by State**																
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
DSNPR Total Number of Procedure Fields provided by the Data Organization. For example, DSNPR may equal 10 because the Data Organization provides for a principal and 9 secondary procedures. However, the number of procedures coded on the discharge will vary from 0 to 10. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
DSNUM Data Source Number. This is an HCUP-assigned data source identification number. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
DSTYPE Data Source Type. Discontinued beginning in 1998. Value Description 1 State Data Organization 2 Hospital Association 3 Consortia 4 Other	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
DXn Diagnosis Codes. DX1 is the principal diagnosis. DX2, DX3, etc. contain the secondary diagnoses. The number of diagnoses varies by Data Organization.	11	30	15	10	Varies by year (10–11)	10	Varies by year (10–16)	16	10	15	10	17	Varies by year (10–11)	10	10	10	10	10

Data Element Name and Description	AZ 1995-2000	CA 1995-2000	CO 1995-2000	FL 1995-2000	IA 1995-2000	KY 2000	MA 1995-2000	MD 1995-2000	ME 1999-2000	NC 2000	NJ 1995-2000	NY 1995-2000	OR 1995-2000	SC 1995-2000	UT 1997-2000	WA 1995-2000	WI 1995-2000	WV 2000
SID Data Elements — Availability by State																		
DXatADMITn Diagnosis present at admission. Added beginning in 1998.		25 Began in 1998										15 Began in 1998						
DXCCSn Clinical Classifications Software (CCS): diagnosis classification. Added beginning in 1998.	11 Began in 1998	30 Began in 1998	15 Began in 1998	10 Began in 1998	11 Began in 1998	10	Varies by year (10-16)	16 Began in 1998	10	15	10 Began in 1998	17 Began in 1998	11 Began in 1998	10 Began in 1998	10 Began in 1998	10 Began in 1998	10 Began in 1998	10
DXSYS Diagnosis Coding System. All diagnoses are ICD-9-CM codes. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
DXVn Diagnosis Validity Flags. Validity flags identify invalid or inconsistent diagnosis in the data elements DXn. There is one validity flag for each diagnosis. DXV1 refers to the principal diagnosis (DX1), DXV2 refers to the first secondary diagnosis (DX2), etc. Discontinued beginning in 1998.	11 Prior to 1998	30 Prior to 1998	15 Prior to 1998	10 Prior to 1998	10 Prior to 1998		10 Prior to 1998	16 Prior to 1998			10 Prior to 1998	17 Prior to 1998	10 Prior to 1998	10 Prior to 1998	10 Prior to 1998	10 Prior to 1998	10 Prior to 1998	

DXVn values:

Value	Description
0	Valid and consistent diagnosis code
1	Invalid code for discharge date
.C	Diagnosis inconsistent with age or sex of patient

Data Element Name and Description	SID Data Elements

Data Element Name and Description	AZ 1995-2000	CA 1995-2000	CO 1995-2000	FL 1995-2000	IA 1995-2000	KY 2000	MA 1995-2000	MD 1995-2000	ME 1999-2000	NC 2000	NJ 1995-2000	NY 1995-2000	OR 1995-2000	SC 1995-2000	UT 1997-2000	WA 1995-2000	WI 1995-2000	WV 2000
FEMALE Indicator of sex. Added beginning in 1998. Value — Description 0 — Male 1 — Female	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x	Began in 1998	Began in 1998	x	x	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x
HISPANIC_X Hispanic ethnicity, as received from the source. Added beginning in 1998.		Began in 1998						Began in 1998			Began in 1998	Began in 1998					Began in 1998	
HOSPID HCUP-defined Hospital Number.	x	x	x	x	x	x	x	x	x	x	x	x	x		x	x	x	x
HOSPST Hospital State Postal Code. Two-digit character (e.g., "CA").	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
HOSPSTCO Hospital State and County Code. Five-digit state and county modified FIPS code listed for that hospital in the American Hospital Association Annual Survey of Hospitals.	x	x	x	x	x	x	x	x	x	x	x	x	x		x	x	x	x
IDNUMBER HCUP-modified AHA Hospital Identification Number. This 6-digit number is identical to the AHA hospital identification number (AHAID) except that the leading "6" has been removed. The AHA hospital identifier is assigned by the AHA and included on their AHA Annual Survey of Hospitals. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998	Prior to 1998	

Data Element Name and Description	SID Data Elements																	
	Availability by State																	
	AZ 1995-2000	CA 1995-2000	CO 1995-2000	FL 1995-2000	IA 1995-2000	KY 2000	MA 1995-2000	MD 1995-2000	ME 1999-2000	NC 2000	NJ 1995-2000	NY 1995-2000	OR 1995-2000	SC 1995-2000	UT 1997-2000	WA 1995-2000	WI 1995-2000	WV 2000
KEY Unique record identifier. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x	Began in 1998	Began in 1998	x	x	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	x
LEVELCARE Level of patient care, as received from source, (e.g., acute care, skilled nursing facility, chemical dependency recovery, and physical rehabilitation.) Preserved as provided by the Data Organization. Added beginning in 1998.		Began in 1998																
LOS Cleaned Length of Stay. Calculated as the difference between the admission and discharge dates before these dates are masked. Same day stays are coded as 0. Inconsistent values (negative or unjustifiably long) have been set to inconsistent (.C) by edit checks during HCUP processing.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
LOS_X Uncleaned Length of Stay. Calculated as the difference between the admission and discharge dates before these dates are masked. Same day stays are coded as 0. No modifications to the value of LOS_X have been made.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
MDBOARD1 Physician 1 licensing board (as received from source) includes source-specific coding of licensing board for Physician 1.	Began in 2000																	

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
MDBOARD2 Physician 2 licensing board (as received from source) includes source-specific coding of licensing board for Physician 2.	Began in 2000																	
MDC Major Diagnostic Category (MDC). MDC is appropriate for the date of discharge and is assigned by the Health Care Finance Administration (HCFA) DRG Grouper algorithm during HCUP processing. The applicable DRG version is available in DRGVER.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
MDC10 Major Diagnostic Category (MDC), Version 10. During HCUP processing, diagnosis and procedure codes are first translated into codes that are in effect during fiscal year 1992, and then Version 10 of the HCFA DRG Grouper algorithm is applied. Discontinued beginning in 2000.	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000		Prior to 2000	Prior to 2000	Prior to 2000		Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	Prior to 2000	
MDC18 MDC, Version 18. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	X	Began in 1998	Began in 1998	X	X	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	X
MDID_S Synthetic Attending Physician Number. Version of the identification number that is encrypted during HCUP processing.	X		X	X	X	X		X		X	X	X				X		X
MDNUM3_S Synthetic Physician Number of third physician. Version of the identification number that is encrypted during HCUP processing.						X				X								

Data Element Name and Description	AZ 1995-2000	CA 1995-2000	CO 1995-2000	FL 1995-2000	IA 1995-2000	KY 2000	MA 1995-2000	MD 1995-2000	ME 1999-2000	NC 2000	NJ 1995-2000	NY 1995-2000	OR 1995-2000	SC 1995-2000	UT 1997-2000	WA 1995-2000	WI 1995-2000	WV 2000
SID Data Elements — Availability by State																		
MDSPEC Attending Physician Specialty. Preserved as provided by the Data Organization.									x		x			x				
MOMNUM_S Synthetic Mother's Number. Version of the identification number that is encrypted during HCUP processing. Can be used to link mother and infant records. Added beginning in 1999.											Began in 1999							
MRN_S Synthetic Medical Record Number. Version of the identification number that is encrypted during HCUP processing.			x		x	x		x	x		x			x			x	
NDX Number of Nonmissing Diagnoses Coded on this Discharge.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

SID Data Elements																		
	Availability by State																	
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
NEOMAT Neonatal/Maternal Flag. Assigned based on diagnosis and procedure codes during HCUP processing. Value Description 0 No neonatal or maternal diagnoses or procedures 1 Maternal diagnosis or procedure present on discharge 2 Neonatal diagnosis or procedure present on discharge 3 Both neonatal and maternal diagnoses or procedures present in the same discharge	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
NPR Number of Nonmissing Procedures Coded on this Discharge.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
PAY1 Expected Primary Payer, Uniform. State-specific coding of payers collapsed into general payer types. Value Description 1 Medicare 2 Medicaid 3 Private Insurance including HMO 4 Self-pay 5 No charge 6 Other	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	X

SID Data Elements																		
	Availability by State																	
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
PAY1_N Expected Primary Payer, Nonuniform. State-specific coding of payers collapsed into more detailed payer types. Discontinued beginning in 1998. Value Description 1 Medicare 2 Medicaid 3 Blue Cross, Blue Cross PPO 4 Commercial, PPO 5 Alternative Delivery Systems (HMO, PHP, etc.) 6 Self-pay 7 No charge 8 Title V 9 Worker's Compensation 10 CHAMPUS or CHAMPVA 11 Other Government 12 Other	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998	Prior to 1998	
PAY1_X Expected Primary Payer. Preserved as provided by the Data Organization.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
PAYER1_X Expected primary payer identifier, plan specific. Added beginning in 1998.		Began in 1999						Began in 1998										x

	SID Data Elements																	
	Availability by State																	
Data Element Name and Description	**AZ**	**CA**	**CO**	**FL**	**IA**	**KY**	**MA**	**MD**	**ME**	**NC**	**NJ**	**NY**	**OR**	**SC**	**UT**	**WA**	**WI**	**WV**
	1995-2000	**1995-2000**	**1995-2000**	**1995-2000**	**1995-2000**	**2000**	**1995-2000**	**1995-2000**	**1999-2000**	**2000**	**1995-2000**	**1995-2000**	**1995-2000**	**1995-2000**	**1997-2000**	**1995-2000**	**1995-2000**	**2000**
PAY2 Expected Secondary Payer, Uniform. State-specific coding of payers collapsed into general payer types. Value. Description 1 Medicare 2 Medicaid 3 Private Insurance including HMO 4 Self-pay 5 No charge 6 Other						x	x	x	Began in 2000	x	x	x	x	x	x	x	x	x

SID Data Elements																	
Availability by State																	
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
PAY2_N Expected Secondary Payer, Nonuniform. State-specific coding of payers collapsed into more detailed payer types. Discontinued beginning in 1998. Value Description 1 Medicare 2 Medicaid 3 Blue Cross, Blue Cross PPO 4 Commercial, PPO 5 Alternative Delivery Systems (HMO, PHP, etc.) 6 Self-pay 7 No charge 8 Title V 9 Worker's Compensation 10 CHAMPUS or CHAMPVA 11 Other Government 12 Other							Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998	Prior to 1998	
PAY2_X Expected Secondary Payer. Preserved as provided by the Data Organization.						x	x	x	Began in 2000	x	x	x	x	x	x	x	x	x
PAYER2_X Expected secondary payer identifier, plan specific. Added beginning in 1998.								Began in 1998										x

Data Element Name and Description	Availability by State																	
	AZ 1995-2000	CA 1995-2000	CO 1995-2000	FL 1995-2000	IA 1995-2000	KY 2000	MA 1995-2000	MD 1995-2000	ME 1999-2000	NC 2000	NJ 1995-2000	NY 1995-2000	OR 1995-2000	SC 1995-2000	UT 1997-2000	WA 1995-2000	WI 1995-2000	WV 2000
PAY3_X Expected Tertiary Payer. Preserved as provided by the Data Organization.						x			Began in 2000	x	x	Began in 1997	x	Began in 2000	x			
PCCHPRn The Clinical Classifications Software (CCS), formerly known as Clinical Classifications for Health Policy Research (CCHPR) was developed by AHRQ for ICD-9-CM procedures. A classification code (PCCHPRn) is assigned during HCUP processing for each procedure (PRn). Values range from 1 to 231. Renamed PRCCSn beginning in 1998.	6 Prior to 1998	21 Prior to 1998	15 Prior to 1998	10 Prior to 1998	6 Prior to 1998		10 Prior to 1998	15 Prior to 1998			8 Prior to 1998	15 Prior to 1998	6 Prior to 1998	10 Prior to 1998	6 Prior to 1998	6 Prior to 1998	6 Prior to 1998	
PNUM_S Synthetic Person Number. Version of the identification number that is encrypted during HCUP processing. PNUM_S is specific to a patient so that multiple admissions by the same patient can be linked within and across institutions.	x	x								x						x		
PRn Procedure Codes. PR1 is the principal procedure. PR2, PR3, etc., contain the secondary procedures. The number of procedures varies by Data Organization.	6	21	15	10	6	6	Varies by year (10-15)	15	10	10	8	15	6	10	6	6	6	6
PRCCSn Clinical Classifications Software (CCS): procedure classification. Added beginning in 1998.	6 Began in 1998	21 Began in 1998	15 Began in 1998	10 Began in 1998	6 Began in 1998	6	Varies by year (10-15)	15 Began in 1998	10	10	8 Began in 1998	15 Began in 1998	6 Began in 1998	10 Began in 1998	6 Began in 1998	6 Began in 1998	6 Began in 1998	6 Began in 1998

SID Data Elements																	
	Availability by State																
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
PRDATEn Date of Principal Procedure. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by PRMONTHn and PRYEARn beginning in 1998.	1 Prior to 1998		1 Prior to 1998		6 Prior to 1998		3 Prior to 1998						6 Prior to 1998					
PRDAYn Day of Principal Procedure. Calculated as the difference between the admission date and date of procedure before these dates are masked. A value of 0 reflects the day of admission. A negative numeric value reflects days prior to admission.	1	21	1	1	6	6	3	11	10	10	8	15	6	10			1	
PRMONTHn Month of procedure. Values range from 1 to 12. Added beginning in 1998.	1 Began in 1998		1 Began in 1998		6 Began in 1998	6	3 Began in 1998		10			15 Began in 1998	6 Began in 1998					
PROCESS Processing Number. Unique record identifier coded as YYSSnnnnnnn, where YY is the discharge year, SS is the state FIPS code, and nnnnnnn is a 7-digit sequence number. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
PRSYS Procedure Coding System. Discontinued beginning in 1998. Value Description 1 ICD-9-CM 2 CPT-4 3 HCPCS/CPT-4 Almost all discharges have ICD-9-CM procedure codes (PRSYS=1).	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
PRVn Procedure Validity Flags. Validity flags identify invalid or inconsistent procedures in the data elements PRn. There is one validity flag for each procedure. PRV1 refers to the principal procedure (PR1), PRV2 refers to the first secondary procedure (PR2), etc. Discontinued beginning in 1998. Value. Description 0 Valid and consistent procedure code 1 Invalid code for discharge date .C Procedure inconsistent with age or sex of patient	6 Prior to 1998	21 Prior to 1998	15 Prior to 1998	10 Prior to 1998	6 Prior to 1998		10 Prior to 1998	15 Prior to 1998			8 Prior to 1998	15 Prior to 1998	6 Prior to 1998	10 Prior to 1998	6 Prior to 1998	6 Prior to 1998	6 Prior to 1998	
PRYEARn Year of procedure. Four-digit year. Added beginning in 1998.	1 Began in 1998		1 Began in 1998		6 Began in 1998	6	3 Began in 1998		10			15 Began in 1998	6 Began in 1998					

SID Data Elements																	
Data Element Name and Description	**Availability by State**																
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
PSTCO Patient State/County FIPS Code. Preserved as provided by the Data Organization. Not derived from zip codes.			x		x				x		x	x		x				
RACE Race. Indicates race and ethnicity in one data element. Value.　Description 1　　White 2　　Black 3　　Hispanic 4　　Asian or Pacific Islander 5　　Native American 6　　Other	x	x	x	x	x		x	x		x	x	x		x			x	
RACE_X Race, as received from data source. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998		Began in 1998	Began in 1998		x	Began in 1998	Began in 1998		Began in 1998			Began in 1998	
RATEn Daily Rate Charges. The number and definition of the rate data elements are determined by the Data Organization.												5						
RDRG Refined DRG. RDRGs were developed at Yale University, assigned by the Data Organization, and preserved as provided.						x				x		Began in 1997				x		

SID Data Elements																	
Data Element Name and Description	**Availability by State**																
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
RDRGWT Refined DRG Weight. The weight associated with the data element RDRG. Preserved as provided by the Data Organization.																x		
READMIT Readmission Flag. The definition of readmission varies by Data Organization. Value.　Description 0　　Not a readmission 1　　Readmission											x							
REVCDn Revenue Codes. The number and definition of the revenue code data elements are determined by the Data Organization.						55	Varies by year (30-110)		33 Began in 2000			25				40		57
SEQ_SID SID Sequence Number. A unique number assigned to each discharge. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998	Prior to 1998	
SEX Sex of the Patient. Renamed FEMALE beginning in 1998. Value　Description 1　　Male 2　　Female	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998		Prior to 1998	Prior to 1998			Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

SID Data Elements																		
Data Element Name and Description	**Availability by State**																	
	AZ 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
SURGID_S Synthetic Primary Surgeon Number. Version of the identification number that is encrypted during HCUP processing.	x		x	x	x	x		x		x	x	x				x		x
SURGSPEC Primary surgeon specialty, as received from source.									x					x				
TMDXn Time of Onset for each Diagnosis. Preserved as provided by the Data Organization. TMDX1 refers to the principal diagnosis (DX1), TMDX2 refers to the first secondary diagnosis (DX2), etc. Renamed DXatADMITn beginning in 1998. Value Description 0 Diagnosis not present at admission 1 Diagnosis present at admission		25 1997 Only										15 Prior to 1998						
TOTCHG Cleaned Total Charges. Inconsistent values (negative or unjustifiably high or low) have been set to inconsistent (.C) by edit checks during HCUP processing.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
TOTCHG_X Uncleaned Total Charges. Preserved as provided by the Data Organization.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

SID Data Elements																		
	Availability by State																	
Data Element Name and Description	**AZ** 1995-2000	**CA** 1995-2000	**CO** 1995-2000	**FL** 1995-2000	**IA** 1995-2000	**KY** 2000	**MA** 1995-2000	**MD** 1995-2000	**ME** 1999-2000	**NC** 2000	**NJ** 1995-2000	**NY** 1995-2000	**OR** 1995-2000	**SC** 1995-2000	**UT** 1997-2000	**WA** 1995-2000	**WI** 1995-2000	**WV** 2000
UNITn Units of Service. The number and definition of the unit data elements are determined by the Data Organization.						55	Varies by year (30-110)		3 Began in 2000		35	5		Varies by year (11-19)		40		57
YEAR Year. Indicates the calendar year of discharge.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
ZIP Patient Zip Code. Preserved as provided by the Data Organization.	x		x	x	x	x				x	x	x	x			x	x	x
ZIP_S Synthetic Patient Zip Code. Encrypted version of the patient's zip code. Last two digits of the zip code are encrypted to ensure the confidentiality of the patient. The state of a patient's residence can still be identified using the first 3 unencrypted zip code digits. ZIP_S does not allow placement of a specific patient within a narrower, zip-code based geography.									x						x			

DESCRIPTION OF STATE AMBULATORY SURGERY DATABASES (SASD)

Overview

The Healthcare Cost and Utilization Project (HCUP) State Ambulatory Surgery Databases (SASD) consist of individual data files from Data Organizations in 15 participating States. In general, the SASD contain that state's ambulatory surgery discharge records. All of the databases include abstracts from hospital-affiliated ambulatory surgery sites. Some contain the universe of ambulatory surgery encounter abstracts for that state, including records from both hospital-affiliated and freestanding surgery centers. Composition and completeness of data files may vary from state to state. The SASD are annual, state-specific files that share a common structure and common data elements. Most data elements are coded in a uniform format across all states. In addition to the core set of uniform data elements, the SASD include state-specific data elements or data elements available only for a limited number of states. The uniform format of the SASD helps facilitate cross-state comparisons. In addition, the SASD are well suited for research that requires complete enumeration of hospitals and discharges within market areas or states.

How the HCUP SASD Differ from State Data Files

The SASD available through the HCUP Central Distributor differ from the data files available from the Data Organizations in the following ways:

• data elements available on the files, and

• coding of data elements.

Because the Data Organizations dictate the data elements that may be released through the HCUP Central Distributor, the data elements on the SASD are a subset of the data collected by the corresponding Data Organizations. HCUP uniform coding is used on most data elements on the SASD. A few state-specific data elements retain the original values provided by the respective Data Organizations.

Types of Ambulatory Surgery Centers Included

The types of facilities, hospital-based and/or freestanding ambulatory surgery centers, included in the SASD depend on the information provided by the Data Organizations. What facilities are included in each state's SASD files are specified in SASD File Overviews (page 38) and SASD Facility Types and Record Counts (page 40).

Identifying Hospital-based Ambulatory Surgery Centers

If the state-specific SASD files contain information from hospital-based ambulatory surgery centers, then up to three hospital identifiers will distinguish facilities.

▪ Some Data Organizations allow the original hospital identifier (DSHOSPID) to be included on the SASD. If available on the SASD, this identifier is coded for all hospitals and may distinguish different units within a hospital.

▪ Some Data Organizations allow the AHA hospital identifier (AHAID) to be included on the SASD. This variable enables the SASD to be linked to the AHA Annual Survey of Hospitals that contain information on hospital characteristics. The AHA hospital identifier is coded for most hospitals. The AHA hospital identifier is missing if the hospital is not registered with the AHA or the source-provided information could not be matched to the AHA.

- Some Data Organizations allow the HCUP-specific hospital identifier (HOSPID) to be included on the SASD. HOSPID is coded for all hospitals with a nonmissing AHA hospital identifier.

Not all Data Organizations permit all three of the hospital identifiers on the SASD.

Identifying Freestanding Ambulatory Surgery Centers

If the state-specific SASD files contain information from freestanding ambulatory surgery centers, then how these facilities can be identified depends on the data year. Starting in 1998, the data element FREESTANDING identifies which facilities are hospital-based or freestanding ambulatory surgery facilities. Prior to 1998, if the AHA hospital identifier is provided on the file and nonmissing, then the facility is hospital-based; otherwise, the facility is a freestanding ambulatory surgery center.

The availability of data elements differs by Data Organization. The following descriptions of the HCUP SASD are provided:

- SASD File Overviews (page 38)

- SASD Facility Types and Record Counts (page 40)

- SASD Data Element Descriptions and Availability by State (page 41)

SASD File Overviews

The following section lists all states releasing their SASD through the HCUP Central Distributor and provides details about sources of the data provided for HCUP. Data elements that are mentioned may not be available through the HCUP Central Distributor. The Data Organizations for each respective state dictate which data elements may be released through the HCUP Central Distributor.

Colorado

The Colorado SASD files were constructed from files supplied by Colorado Health and Hospital Association Discharge Data Program (DDP). These files consist of discharge records from ambulatory surgery centers that are associated with acute care hospitals. Data from freestanding ambulatory surgery centers are not included.

Florida

The Florida SASD were constructed from the confidential Ambulatory Outpatient files received from the Florida Agency for Health Care Administration (AHCA). The AHCA collects ambulatory patient data from short-term acute care hospitals, freestanding ambulatory surgery centers, radiation therapy centers, lithotripsy centers, cardiac catheterization laboratories and providers of radiation therapy. Any Florida ambulatory surgery center that has a total of 200 or more visits per quarter is required to report data to AHCA. Facilities with fewer than 200 patient visits in a quarter must certify that fact in writing each quarter to be exempt. The Florida SASD files contain both hospital-based and freestanding ambulatory surgery centers.

Maryland

The Maryland SASD files were constructed from demographic and utilization data and Uniform Bill (UB) charge data from the Maryland Health Services Cost Review Commission (HSCRC) Ambulatory Surgery Confidential Data Set. The HSCRC supplied data for ambulatory surgery visits from ambulatory surgery centers that are associated with acute care hospitals. Data from freestanding ambulatory surgery centers are not included.

New Jersey

The New Jersey SASD files were constructed from confidential data received from the Health Care Planning, Financing, and Information Services of the New Jersey Department of Health and Senior Services. The files consist of ambulatory surgery centers that are associated with acute care hospitals. Data from freestanding ambulatory surgery centers are not included.

New York

The New York SASD files were constructed from the New York State Department of Health's Statewide Planning and Research Cooperative System (SPARCS) outpatient data file. New York supplied data for freestanding ambulatory surgery centers and for same-day surgical stays at all New York hospitals, excluding long-term care units of short-term hospitals and Federal hospitals. The New York SASD files contain data for both hospital-based and freestanding ambulatory surgery centers.

Utah

The Utah SASD files were constructed from confidential files received from the Office of Health Care Statistics, Utah Department of Health. Utah supplied data on selected ambulatory surgeries occurring in hospital outpatient departments, hospital-affiliated ambulatory surgery centers, and freestanding ambulatory surgery centers. The Utah SASD files contain both hospital-based and freestanding ambulatory surgery centers.

Wisconsin

The Wisconsin SASD files were constructed from confidential files received from the Wisconsin Department of Health and Family Services. The Wisconsin SASD files contain both hospital-based and freestanding ambulatory surgery centers.

SASD Facility Types and Record Counts

The following tables list the types of ambulatory surgery centers and the number of discharges in the HCUP SASD for 1997-2000.

State	Hospital-Based Ambulatory Surgery Centers	Freestanding Ambulatory Surgery Centers	Other
Colorado	Yes	No	No
Florida	Yes	Yes	Radiation therapy centers, lithotripsy centers, cardiac catheterization laboratories and providers of radiation therapy
Maryland	Yes	No	No
New Jersey	Yes	No	No
New York	Yes	Yes	No
Utah	Yes	Yes	No
Wisconsin	Yes	Yes	No

State	1997 Discharges	1998 Discharges	1999 Discharges	2000 Discharges
Colorado	279,080	300,727	349,765	370,233
Florida	2,327,593	2,511,475	2,380,685	2,672,550
Maryland	347,974	353,969	357,975	370,443
New Jersey	356,353	371,872	366,438	362,343
New York	1,107,192	1,197,172	1,254,990	1,322,941
Utah	149,053	159,145	189,279	204,079
Wisconsin	Not Available	556,976	592,609	632,010

SASD Data Element Descriptions and Availability by State

The following table (page 42) describes the HCUP SASD data elements. Not all HCUP SASD data elements are available from all Data Organizations. The availability columns refer to the states using the state postal code (e.g., CO for Colorado). Cells marked with an "x" indicate that the data element is available for that state. Blank cells indicate that the data element is not available for that state. More detailed descriptions and coding information of the HCUP SASD data elements accompany the purchase of the data files.

In some cases, multiple data elements of the same type are available (e.g., principal and secondary diagnoses). The small "n" in the data element name (e.g., DXn) indicates that there is more than one data element of that type. The number of data elements available is specified in the state-specific cell. For example, the cell for diagnoses (i.e., DXn) identifies the number of available diagnoses. CO has 15 diagnoses: 1 principal diagnosis and 14 secondary diagnoses. Not all diagnoses are coded on all records.

<table>
<tr><td colspan="9" align="center">**SASD Data Elements**</td></tr>
<tr>
<td rowspan="3">**Data Element Name**</td>
<td rowspan="3">**Description**</td>
<td colspan="7" align="center">**Availability by State**</td>
</tr>
<tr>
<td>**CO**</td><td>**FL**</td><td>**MD**</td><td>**NJ**</td><td>**NY**</td><td>**UT**</td><td>**WI**</td>
</tr>
<tr>
<td>**1997-2000**</td><td>**1997-2000**</td><td>**1997-2000**</td><td>**1997-2000**</td><td>**1997-2000**</td><td>**1997-2000**</td><td>**1998-2000**</td>
</tr>
<tr>
<td>**ADATE**</td>
<td>Admission Date. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by AMONTH and AYEAR beginning in 1998.</td>
<td>Prior to 1998</td><td></td><td></td><td></td><td></td><td>Prior to 1998</td><td></td>
</tr>
<tr>
<td>**ADAYWK**</td>
<td>Admission Day of Week. Discontinued beginning in 1998.

Value   Description
1   Sunday
2   Monday
3   Tuesday
4   Wednesday
5   Thursday
6   Friday
7   Saturday</td>
<td>Prior to 1998</td><td></td><td>Prior to 1998</td><td>Prior to 1998</td><td>Prior to 1998</td><td>Prior to 1998</td><td></td>
</tr>
<tr>
<td>**AGE**</td>
<td>Age in Years at Admission. Calculated as the difference between the admission date and date of birth before these dates are masked.</td>
<td>x</td><td>x</td><td>x</td><td>x</td><td>x</td><td>x</td><td>x</td>
</tr>
<tr>
<td>**AGEDAY**</td>
<td>Age in Days at Admission. Only coded when patient is less than one year old. Calculated as the difference between the admission date and date of birth before these dates are masked. Added beginning in 1998.</td>
<td>Began in 1998</td><td></td><td>Began in 1998</td><td>Began in 1998</td><td>Began in 1998</td><td>Began in 1998</td><td>Began in 1998</td>
</tr>
<tr>
<td>**AGEMONTH**</td>
<td>Age in months. Only coded when patient is less than 11 years old. Calculated as the difference between the admission date and date of birth before these dates are masked. Added beginning in 1998.</td>
<td>Began in 1998</td><td></td><td>Began in 1998</td><td>Began in 1998</td><td>Began in 1998</td><td>Began in 1998</td><td>Began in 1998</td>
</tr>
<tr>
<td>**AHAID**</td>
<td>AHA Hospital Identification Number. This 7-digit number is assigned by the American Hospital Association (AHA) and included on their AHA Annual Survey of Hospitals.</td>
<td>x</td><td>x</td><td>x</td><td>x</td><td>x</td><td>x</td><td>x</td>
</tr>
</table>

	SASD Data Elements							
		Availability by State						
Data Element Name	**Description**	**CO** 1997-2000	**FL** 1997-2000	**MD** 1997-2000	**NJ** 1997-2000	**NY** 1997-2000	**UT** 1997-2000	**WI** 1998-2000
AMONTH	Admission Month. Values ranges from 1 to 12.	x			x	Began in 1998	x	x
ANESTH	The method of anesthesia. Value — Description 0 — No Anesthesia 10 — Local Anesthesia 20 — General Anesthesia 30 — Regional Anesthesia 40 — Other					x		
ASOURCE	Admission Source. Added beginning in 1998. Value — Description 1 — Emergency Department 2 — Another Hospital 3 — Other Health Facility including Long-Term Care Facilities 4 — Court/Law Enforcement 5 — Routine, Birth and Other	Began in 1998			Began in 1998		Began in 1998	
ASOURCE_X	Admission source, as received from source. Added beginning in 1998.	Began in 1998			Began in 1998		Began in 1998	
ATYPE	Admission Type. Added beginning in 1998. Value — Description 1 — Emergency 2 — Urgent 3 — Elective 4 — Newborn 5 — Other				Began in 1998			Began in 1998

	SASD Data Elements							
		Availability by State						
Data Element Name	**Description**	**CO 1997-2000**	**FL 1997-2000**	**MD 1997-2000**	**NJ 1997-2000**	**NY 1997-2000**	**UT 1997-2000**	**WI 1998-2000**
AWEEKEND	Admission day is on a weekend. Added beginning in 1998.	Began in 1998		Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998
AYEAR	Admission year. Four-digit year. Added beginning in 1998.	Began in 1998				Began in 1998	Began in 1998	Began in 1998
BMONTH	Birth month. Values range from 1 to 12. Added beginning in 1998.					Began in 1998	Began in 1998	Began in 1998
BYEAR	Admission year. Four-digit year. Added beginning in 1998.					Began in 1998	Began in 1998	Began in 1998
CHGn	Charge Detail. The number and definitions of the detailed charges are determined by the Data Organization.	5	11	8	35			
CPTn	CPT-4/HCPCS procedures. The number of procedure codes vary by Data Organization.	15	15	8			6	6
DCCHPRn	The Clinical Classifications Software (CCS), formerly known as Clinical Classifications for Health Policy Research (CCHPR), was developed by AHRQ for ICD-9-CM diagnoses. A classification code (DCCHPRn) is assigned during HCUP processing for each diagnosis (DXn). Values range from 1-260. Renamed DXCCSn beginning in 1998.	15 Prior to 1998	5 Prior to 1998	9 Prior to 1998	10 Prior to 1998	6 Prior to 1998	9 Prior to 1998	
DDATE	Discharge Date. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by DMONTH and YEAR beginning in 1998.	Prior to 1998				Prior to 1998	Prior to 1998	
DIED	Died During Hospitalization. This data element was created during HCUP processing using the disposition of the patient at discharge (DISP). Value Description 0 Did not die 1 Died	x	Began in 1999	x	1997 Only	x	x	

		Availability by State						

<table>
<tr><td colspan="9" align="center">SASD Data Elements</td></tr>
<tr><td rowspan="3">Data Element Name</td><td rowspan="3">Description</td><td colspan="7" align="center">Availability by State</td></tr>
<tr><td>CO</td><td>FL</td><td>MD</td><td>NJ</td><td>NY</td><td>UT</td><td>WI</td></tr>
<tr><td>1997-2000</td><td>1997-2000</td><td>1997-2000</td><td>1997-2000</td><td>1997-2000</td><td>1997-2000</td><td>1998-2000</td></tr>
<tr>
<td>DISP</td>
<td>Disposition of Patient at Discharge. Discontinued beginning in 1998.

   Value   Description
    1   Routine
    2   Short-term Hospital
    3   Skilled Nursing Facility
    4   Intermediate Care Facility
    5   Another Type of Facility
    6   Home Health Care
    7   Against Medical Advice
   20   Died</td>
<td>Prior to 1998</td>
<td></td>
<td>Prior to 1998</td>
<td>Prior to 1998</td>
<td>Prior to 1998</td>
<td>Prior to 1998</td>
<td></td>
</tr>
<tr>
<td>DISP_X</td>
<td>Disposition of patient, as received from source. Added beginning in 1998.</td>
<td>Began in 1998</td>
<td>Began in 1999</td>
<td>Began in 1998</td>
<td></td>
<td>Began in 1998</td>
<td>Began in 1998</td>
<td></td>
</tr>
<tr>
<td>DISPUB92</td>
<td>Disposition of patient, UB92 coding. Added beginning in 1998.</td>
<td>Began in 1998</td>
<td>Began in 1999</td>
<td></td>
<td></td>
<td>Began in 1998</td>
<td>Began in 1998</td>
<td></td>
</tr>
<tr>
<td>DISPUniform</td>
<td>Disposition of patient, uniform coding. Added beginning in 1998.</td>
<td>Began in 1998</td>
<td>Began in 1999</td>
<td>Began in 1998</td>
<td></td>
<td>Began in 1998</td>
<td>Began in 1998</td>
<td></td>
</tr>
<tr>
<td>DMONTH</td>
<td>Discharge month of procedure. Values from 1 to 12. Added beginning in 1998.</td>
<td>Began in 1998</td>
<td></td>
<td></td>
<td></td>
<td>Began in 1998</td>
<td>Began in 1998</td>
<td>Began in 1998</td>
</tr>
<tr>
<td>DNR</td>
<td>Do not resuscitate. Added beginning in 1998.

   Value   Description
    0   No "Do not resuscitate" order
    1   "Do not resuscitate" order</td>
<td></td>
<td></td>
<td></td>
<td>Began in 1998</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOB</td>
<td>Date of Birth. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by BMONTH and BYEAR beginning in 1998.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Prior to 1998</td>
<td>Prior to 1998</td>
<td></td>
</tr>
</table>

		Availability by State						
	SASD Data Elements							
Data Element Name	**Description**	**CO** 1997-2000	**FL** 1997-2000	**MD** 1997-2000	**NJ** 1997-2000	**NY** 1997-2000	**UT** 1997-2000	**WI** 1998-2000

DQTR	Discharge Quarter prior to 1998. Derived from discharge date (DDATE). Beginning in 1998 DDATE replaced by DMONTH and YEAR.
	
	Value Description
	   1 First Quarter (Jan. - Mar.)
	   2 Second Quarter (Apr. - June)
	   3 Third Quarter (July - Sep.)
	   4 Fourth Quarter (Oct. - Dec.)
	   0 Missing or Invalid
		x	x	x	x	x	x	x

DSHOSPID	Hospital Identifier Provided by the Data Organization.	x	x	x	x	x	x	x
DSNCPT	Number of CPT-4/HCPCS procedure fields in this data source. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998			Prior to 1998	
DSNDX	Total Number of Diagnosis Fields Provided by the Data Organization. For example, DSNDX may equal 10 because the Data Organization provides for a principal and 9 secondary diagnoses. However, the number of diagnoses coded on the discharge will vary from 0 to 10. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
DSNPR	Total Number of Procedure Fields provided by the Data Organization. For example, DSNPR may equal 10 because the Data Organization provides for a principal and 9 secondary procedures. However, the number of procedures coded on the discharge will vary from 0 to 10. Discontinued beginning in 1998.	Prior to 1998		Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
DSNUM	Data Source Number. This is an HCUP-assigned data source identification number. Discontinued beginning in 1998.	Prior to 1998		Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

		SASD Data Elements							

Data Element Name	Description	Availability by State						
		CO 1997-2000	FL 1997-2000	MD 1997-2000	NJ 1997-2000	NY 1997-2000	UT 1997-2000	WI 1998-2000

DSTYPE	Data Source Type. Discontinued beginning in 1998.
	
	   Value Description
	    1 State Data Organization
	    2 Hospital Association
	    3 Consortia
		Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

DXn	Diagnosis Codes. DX1 is the principal diagnosis. DX2, DX3, etc., contain the secondary diagnoses. The number of diagnoses varies by Data Organization.	15	5	9	10	6	9	10
DXCCSn	Clinical Classifications Software (CCS): diagnosis classification. Added beginning in 1998.	15 Began in 1998	5 Began in 1998	9 Began in 1998	10 Began in 1998	6 Began in 1998	9 Began in 1998	10 Began in 1998
DXSYS	Diagnosis Coding System. All diagnoses are ICD-9-CM codes. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

DXVn	Diagnosis Validity Flags. Validity flags identify invalid or inconsistent diagnosis in the data elements DXn. There is one validity flag for each diagnosis. DXV1 refers to the principal diagnosis (DX1), DXV2 refers to the first secondary diagnosis (DX2), etc. Discontinued beginning in 1998.
	
	   Value Description
	    0 Valid and consistent diagnosis code
	    1 Invalid code for discharge date
	    .C Diagnosis inconsistent with age or sex of patient
		15
		Prior to 1998
			5
			Prior to 1998
				9
				Prior to 1998
					10
					Prior to 1998
						6
						Prior to 1998
							9
							Prior to 1998	

FEMALE	Indicator of sex. Added beginning in 1998.
	
	   Value Description
	    0 Male
	    1 Female
		Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998

SASD Data Elements								
		Availability by State						
Data Element Name	**Description**	**CO 1997-2000**	**FL 1997-2000**	**MD 1997-2000**	**NJ 1997-2000**	**NY 1997-2000**	**UT 1997-2000**	**WI 1998-2000**

FREESTANDING	Indicator of freestanding ambulatory surgery center. Added beginning in 1998.
	
	    <u>Value</u> <u>Description</u>
	    0 Hospital-based facility
	    1 Ambulatory Surgery Center
		Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998

HISPANIC_X	Hispanic ethnicity, as received from the source. Added beginning in 1998.			Began in 1998	Began in 1998			Began in 1998
HOSPID	HCUP-defined Hospital Number.	x	x	x	x	x	x	x
HOSPST	Hospital State Postal Code. Two-digit character (e.g., "CO")	x	x	x	x	x	x	x
HOSPSTCO	Hospital State and County Code. Five-digit state and county modified FIPS code listed for that hospital in the AHA Annual Survey of Hospitals.	x	x	x	x	x	x	x
IDNUMBER	HCUP-modified AHA Hospital Identification Number. This 6-digit number is identical to the AHA hospital identification number (AHAID) except that the leading "6" has been removed. The AHA hospital identifier is assigned by the AHA and included on their AHA Annual Survey of Hospitals. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
KEY	Unique record identifier. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998	Began in 1998
LOS	Cleaned Length of Stay. Calculated as the difference between the admission and discharge dates before these dates are masked. Same day stays are coded as 0. Inconsistent values (negative or unjustifiably long) have been set to inconsistent (.C) by edit checks during HCUP processing.	x		x	x	Began in 1998	x	x

		SASD Data Elements						

Data Element Name	Description	Availability by State						
		CO 1997-2000	FL 1997-2000	MD 1997-2000	NJ 1997-2000	NY 1997-2000	UT 1997-2000	WI 1998-2000
LOS_X	Uncleaned Length of Stay. Calculated as the difference between the admission and discharge dates before these dates are masked. Same day stays are coded as 0. No modifications to the value of LOS_X have been made.	x		x	x	Began in 1998	x	x
MDID_S	Synthetic Attending Physician Number. Version of the identification number that is encrypted during HCUP processing.	x	x		x			
MDSPEC	Attending Physician Specialty. Preserved as provided by the Data Organization.				Began in 1998			
MRN_S	Synthetic Medical Record Number. Version of the identification number that is encrypted during HCUP processing.	x		x	x			x
NCPT	Number of Nonmissing CPT-4/HCPCS Procedures Coded on this Discharge.	x	x	x			x	x
NDX	Number of Nonmissing Diagnoses Coded on this Discharge.	x	x	x	x	x	x	x
NEOMAT	Neonatal/Maternal Flag. Assigned based on diagnosis and procedure codes during HCUP processing. Value Description 0 No neonatal or maternal diagnoses or procedures 1 Maternal diagnosis or procedure present on discharge 2 Neonatal diagnosis or procedure present on discharge 3 Both neonatal and maternal diagnoses or procedures present on the same discharge	x	x	x	x	x	x	x
NPR	Number of Nonmissing Procedures Coded on this Discharge.	x	Began in 1999	x	x	x	x	x
ORTIME	Operating Room Time. Reported in minutes.					x		

SASD Data Elements

Data Element Name	Description	Availability by State						
		CO 1997-2000	**FL** 1997-2000	**MD** 1997-2000	**NJ** 1997-2000	**NY** 1997-2000	**UT** 1997-2000	**WI** 1998-2000
PAY1	Expected Primary Payer, Uniform. State-specific coding of payers collapsed into general payer types. Value Description 1 Medicare 2 Medicaid 3 Private Insurance including HMO 4 Self-pay 5 No charge 6 Other	x	x	x	x	x	x	x
PAY1_N	Expected Primary Payer, Nonuniform. State-specific coding of payers collapsed into more detailed payer types. Discontinued beginning 1998. Value Description 1 Medicare 2 Medicaid 3 Blue Cross, Blue Cross PPO 4 Commercial, PPO 5 Alternative Delivery Systems (HMO, PHP, etc.) 6 Self-pay 7 No charge 8 Title V 9 Worker's Compensation 10 CHAMPUS or CHAMPVA 11 Other Government 12 Other	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

	SASD Data Elements							
		Availability by State						
Data Element Name	**Description**	**CO** 1997-2000	**FL** 1997-2000	**MD** 1997-2000	**NJ** 1997-2000	**NY** 1997-2000	**UT** 1997-2000	**WI** 1998-2000
PAY1_X	Expected Primary Payer. Preserved as provided by the Data Organization.	x	x	x	x	x	x	x
PAYER1_X	Expected Primary Payer (plan specific). Preserved as provided by the Data Organization.			x				
PAY2	Expected Secondary Payer, Uniform. State-specific coding of payers collapsed into general payer types. Value Description 1 Medicare 2 Medicaid 3 Private Insurance including HMO 4 Self-pay 5 No charge 6 Other			x	x		x	x

SASD Data Elements								

		Availability by State						
Data Element Name	Description	CO 1997-2000	FL 1997-2000	MD 1997-2000	NJ 1997-2000	NY 1997-2000	UT 1997-2000	WI 1998-2000
PAY2_N	Expected Secondary Payer, Nonuniform. State-specific coding of payers collapsed into more detailed payer types. Discontinued beginning in 1998. Value Description 1 Medicare 2 Medicaid 3 Blue Cross, Blue Cross PPO 4 Commercial, PPO 5 Alternative Delivery Systems (HMO, PHP, etc.) 6 Self-pay 7 No charge 8 Title V 9 Worker's Compensation 10 Other Government 11 Other			**Prior** to 1998	**Prior** to 1998		**Prior** to 1998	
PAY2_X	Expected Secondary Payer. Preserved as provided by the Data Organization.			x	x		x	x
PAYER2_X	Expected Secondary Payer ID (plan specific). Preserved as provided by the Data Organization.			x				
PAY3_X	Expected tertiary payer, as received from data source.				Began in 1998		Began in 1998	
PCCHPRn	The Clinical Classifications Software (CCS), formerly known as Clinical Classifications for Health Policy Research (CCHPR) was developed by AHRQ for ICD-9-CM procedures. A classification code (PCCHPRn) is assigned during HCUP processing for each procedure (PRn). Values range from 1 to 231. Renamed PRCCSn beginning in 1998.	15 Prior to 1998		8 Prior to 1998	8 Prior to 1998	6 Prior to 1998	6 Prior to 1998	

	SASD Data Elements							
		Availability by State						
Data Element Name	**Description**	**CO 1997-2000**	**FL 1997-2000**	**MD 1997-2000**	**NJ 1997-2000**	**NY 1997-2000**	**UT 1997-2000**	**WI 1998-2000**
PRn	Procedure Codes. PR1 is the principal procedure. PR2, PR3, etc. contain the secondary procedures. The number of procedures vary by Data Organization.	15	1 Began in 1999	8	8	6	6	6
PRCCSn	Clinical Classifications Software (CCS): procedure classification. Added beginning in 1998.	15 Began in 1998	1 Began in 1999	8 Began in 1998	8 Began in 1998	6 Began in 1998	6 Began in 1998	6 Began in 1998
PRDATEn	Date of Principal Procedure. The day portion of the date has been changed to the first of the month to ensure the confidentiality of the patient. The month and year portions of the date remain as provided by the Data Organization. Replaced by PRMONTHn and PRYEARn beginning in 1998.	1 Prior to 1998					1 Prior to 1998	
PRDAYn	Day of Principal Procedure. Calculated as the difference between the admission date and date of procedure before these dates are masked. A value of 0 reflects the day of admission. A negative numeric value reflects days prior to admission.	1			8		1	1
PRMONTHn	Month of procedure. Values range from 1 to 12. Added beginning in 1998.	1 Began in 1998					1 Began in 1998	
PROCESS	Processing Number. Unique record identifier coded as YYSSnnnnnnn, where YY is the discharge year, SS is the state FIPS code, and nnnnnnn is a 7-digit sequence number. Discontinued beginning in 1998.	Prior to 1998		Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

PROFEE	Indicator of Professional Fees in Total Charges. In almost all state databases, professional fees are excluded from total charges.
	
	    <u>Value</u> <u>Description</u>
	     1 Yes
	     2 No
			x					

SASD Data Elements								
		Availability by State						
Data Element Name	**Description**	**CO 1997-2000**	**FL 1997-2000**	**MD 1997-2000**	**NJ 1997-2000**	**NY 1997-2000**	**UT 1997-2000**	**WI 1998-2000**

PRSYS	Procedure Coding System. Discontinued beginning in 1998.
	
	Value Description
	  1 ICD-9-CM
	  2 CPT-4
	  3 HCPCS/CPT-4
	
	Almost all discharges have ICD-9-CM procedure codes (PRSYS=1).
		Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	

PRVn	Procedure Validity Flags. Validity flags identify invalid or inconsistent procedures in the data elements PRn. There is one validity flag for each procedure. PRV1 refers to the principal procedure (PR1), PRV2 refers to the first secondary procedure (PR2), etc. Discontinued beginning in 1998.
	
	Value Description
	  0 Valid and consistent procedure code
	  1 Invalid code for discharge date
	  .C Procedure inconsistent with age or sex of patient
		15
		Prior to 1998
				8
				Prior to 1998
					8
					Prior to 1998
						6
						Prior to 1998
							6
							Prior to 1998	

PRYEARn	Year of procedure. Four-digit year. Added beginning in 1998.	1 Began in 1998					1 Began in 1998	
PSTCO	Patient State/County Code. Preserved as provided by the Data Organization. Not derived from zip codes.	x	1997 Only	x	x			

		SASD Data Elements						
			Availability by State					
Data Element Name	**Description**	**CO 1997-2000**	**FL 1997-2000**	**MD 1997-2000**	**NJ 1997-2000**	**NY 1997-2000**	**UT 1997-2000**	**WI 1998-2000**
RACE	Race. Indicates race and ethnicity in one data element. Value Description 1 White 2 Black 3 Hispanic 4 Asian or Pacific Islander 5 Native American 6 Other	x	x	x	x			x
RACE_X	Race, as received from data source. Added beginning in 1998.	Began in 1998	Began in 1998	Began in 1998	Began in 1998			Began in 1998
READMIT	Readmission Flag. The definition of readmission varies by Data Organization. Added beginning in 1998. Value Description 0 Not a readmission 1 Readmission				Began in 1998			
SEQ_ASD	SASD Sequence Number. A unique number assigned to each discharge. Discontinued beginning in 1998.	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
SEX	Sex of the Patient. Renamed FEMALE beginning in 1998. Value Description 1 Male 2 Female	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	Prior to 1998	
SURGID_S	Synthetic Primary Surgeon Number. Version of the identification number that is encrypted during HCUP processing.	x	x	x	x	x		
TOTCHG	Cleaned Total Charges. Inconsistent values (negative or unjustifiably high or low) have been set to inconsistent (.C) by edit checks during HCUP processing.	x	x	x	x		x	x

	SASD Data Elements							
		Availability by State						
Data Element Name	**Description**	**CO** 1997-2000	**FL** 1997-2000	**MD** 1997-2000	**NJ** 1997-2000	**NY** 1997-2000	**UT** 1997-2000	**WI** 1998-2000
TOTCHG_X	Uncleaned Total Charges. Preserved as provided by the Data Organization.	x	x	x	x		x	x
UNITn	Units of Service. The number and definition of the unit data elements are determined by the Data Organization.				35			
YEAR	Year. Indicates the calendar year (yy) of discharge.	x	x	x	x	x	x	x
ZIP	Patient Zip Code. Preserved as provided by the Data Organization.	x	x		x	x		x
ZIP_S	Synthetic Patient Zip Code. Encrypted version of the patient's zip code. Last two digits of the zip code are encrypted to ensure the confidentiality of the patient. The state of a patient's residence can still be identified using the first 3 unencrypted zip code digits. ZIP_S does not allow placement of a specific patient within a narrower, zip-code based geography.						x	

CENTRAL DISTRIBUTOR

UNIFORM STATE APPLICATION

Data Organizations participating in the Healthcare Cost and Utilization Project (HCUP) have agreed to release their State Inpatient Databases (SID) and State Ambulatory Surgery Databases (SASD) through a Central Distributor under the auspices of the Agency for Healthcare Research and Quality (AHRQ). This uniform application was designed by the participating Data Organizations to satisfy their requirements. As such, the information requested in this application is for the Data Organizations. The information is not for AHRQ or the HCUP Central Distributor. AHRQ and the HCUP Central Distributor are facilitating access to the SID and SASD, which are owned and regulated by the individual Data Organizations participating in HCUP. The Data Organizations dictate which data elements may be released through the HCUP Central Distributor. However, data elements in the SID and SASD are in a uniform HCUP format that is consistent across all states and years of HCUP data.

Directions to Complete the Uniform State Application:

1. Print or type all responses (electronic copy available on request).

2. Complete all applicable parts of this application.
   Part I   Organization and/or Individual Requesting Use of the HCUP Databases (page 58)
   Part II   Intended Use of Data and Project Activities (page 59)
   Part III   Selection of HCUP Databases (page 61)

3. Determine the Total Payment Due and Select Payment Method (Part IV, page 65).

4. Read and sign the Indemnification Clause (Part V, page 67).

5. Read and sign the Data Use Agreement for HCUP State Inpatient Databases (Part VI, page 68), if purchasing SID files.

6. Read and sign the Data Use Agreement for HCUP State Ambulatory Surgery Databases (Part VII, page 70), if purchasing SASD files.

7. Submit the completed application (pages 58-72):

   HCUP Central Distributor
   Social & Scientific Systems, Inc.
   8757 Georgia Avenue, 12th Floor
   Silver Spring, MD 20910

   *Telephone: (*866) 556-4287-toll free   *Fax: (301) 628-3201*   *E-mail: hcup@s-3.com*

Part I: Organization and/or Individual Requesting Use of the HCUP Databases

General Information:

Applicant Name: _____

Position/Title: _____

Organization (include Branch, Division, Department): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax: _____

Internet Address: _____

Type of Organization:

Check the *one* box that best describes your organization.

❑   University/college/teaching institution

❑   Government agency

❑   Managed care, insurer

❑   Healthcare provider

❑   Pharmaceutical, biotechnology, medical product firm

❑   Trade association, lobbying group, consortium

❑   Research organization, consultant

❑   Other (describe in space provided)

Check the *one* box that best characterizes the type of ownership of your organization.

❑   Not-for-profit

❑   For-profit

Part II: Intended Use of Data and Project Activities

Describe the intended use of the data requested. Attach additional pages if necessary. Include:

▪   Brief description of project(s) and intended use of the data (e.g., clinical research, health services research, analyses to address public policy issues, analyses to address private policy issues, creating products or tools such as quality measurements, severity adjustment software, etc.)

▪   Brief description of the subject area(s) that you plan to investigate (e.g., health outcomes, quality, cost, utilization, access, markets, etc.)

▪   Brief description of the potential uses of the final products that you may create using the data (e.g., papers, reports, tools, analyses for public domain and/or internal use, etc.)

Please refer to Part VI "Data Use Agreement for HCUP State Inpatient Databases" (page 68) for a complete description of the acceptable uses of the HCUP SID; and refer to Part VII "Data Use Agreement for HCUP State Ambulatory Surgery Databases" (page 70) for a complete description of the acceptable uses of the HCUP SASD. In general, the HCUP SID and SASD are available for the purpose of research and aggregate statistical reporting. Attempts to identify individuals are strictly prohibited. Information that could identify individuals or establishments directly or by inference may not be released in disseminated materials. The data may not be re-released in any form without prior approval of the participating Data Organization(s).

HCUP Request:

Check *all* boxes that describe the reasons for requesting the HCUP databases.

❑   Research requires specific state(s).

❑   Research requires variables only available in the selected states (e.g., encrypted patient zip codes, encrypted physician identifiers). Indicate variables below.

_____

_____

_____

_____

_____

_____

Other (describe in space provided)

_____

_____

_____

_____

_____

_____

_____

Section I.   Select State Inpatient Databases (SID)

Mark boxes for the data you are requesting (see next page). Please refer to "Description of State Inpatient Databases (SID)" (page 2) to make your selection. Not all HCUP data elements are available from every state.

The participating Data Organizations dictate the price of the data. Handling charges are already included and are based on the number of CD-ROMs required to hold the data. Some Data Organizations offer a price discount to AHRQ Grant recipients. If you are not sure if you qualify for this discount, please refer to Section III. AHRQ Grantee (page 64). Enter the total cost of requested data under the column titled "Total." If you have any question or want information on other years of data or more sensitive data elements for a state, please contact the HCUP Central Distributor by phone at (866) 556-4287 (toll free), fax at (301) 628-3201, or e-mail at hcup@s-3.com.

State	HCUP SID Price Structure	1995	1996	1997	1998	1999	2000	Total
Arizona	All Applicants	❑ $ 20	❑ $ 20	❑ $ 20	❑ $ 20	❑ $ 20	❑ $ 20	
California	All Applicants	❑ $ 470	❑ $ 470	❑ $ 470	❑ $ 420	❑ $ 420	❑ $ 420	
Colorado	All Others	❑ $ 320	❑ $ 320	❑ $ 320	❑ $ 320	❑ $ 320	❑ $ 320	
	AHRQ Grantee (Complete Section III, page 64)	❑ $ 220	❑ $ 220	❑ $ 220	❑ $ 220	❑ $ 220	❑ $ 220	
Florida	All Applicants	❑ $ 550	❑ $ 550	❑ $ 550	❑ $ 545	❑ $ 545	❑ $ 545	
Iowa	Not-for-profit Affiliation	❑ $ 420	❑ $ 420	❑ $ 420	❑ $ 420	❑ $ 420	❑ $ 420	
	For-profit Affiliation	❑ $ 420	❑ $ 420	❑ $ 420	❑ $ 820	❑ $ 820	❑ $ 820	
Kentucky	All Applicants	Not Available	Not Available	Not Available	Not Available	Not Available	❑ $ 1,520	
Maine	All Applicants	Not Available	Not Available	Not Available	Not Available	❑ $ 420	❑ $ 420	
Maryland	All Applicants	❑ $ 20	❑ $ 20	❑ $ 20	❑ $ 20	❑ $ 20	❑ $ 20	
Massachusetts	All Applicants	❑ $ 830	❑ $ 830	❑ $ 830	❑ $ 820	❑ $ 820	❑ $ 820	
New Jersey	All Applicants	❑ $ 1,230	❑ $ 1,225	❑ $ 1,225	❑ $ 1,220	❑ $ 1,220	❑ $ 1,220	
New York	All Others	❑ $ 695	❑ $ 695	❑ $ 690	❑ $ 670	❑ $ 670	❑ $ 670	
	AHRQ Grantee (Complete Section III, page 64)	❑ $ 370	❑ $ 370	❑ $ 365	❑ $ 345	❑ $ 345	❑ $ 345	
North Carolina	Not-for-profit Affiliation	Not Available	Not Available	Not Available	Not Available	Not Available	❑ $ 540	
	For-profit Affiliation	Not Available	Not Available	Not Available	Not Available	Not Available	❑ $ 1,040	
Oregon	Not-for-profit Affiliation	❑ $ 20	❑ $ 420	❑ $ 420	❑ $ 520	❑ $ 520	❑ $ 770	
	For-profit Affiliation	❑ $ 20	❑ $ 420	❑ $ 620	❑ $ 770	❑ $ 770	❑ $ 1,520	
South Carolina	All Applicants	❑ $ 470	❑ $ 470	❑ $ 470	❑ $ 620	❑ $ 620	❑ $ 620	
Utah	Public, State/Federal Agency, Academic Organization	Not Available	Not Available	❑ $ 1,520	❑ $ 1,520	❑ $ 1,520	❑ $ 1,520	
	Private Organization	Not Available	Not Available	❑ $ 3,020	❑ $ 3,020	❑ $ 3,020	❑ $ 3,020	
Washington	All Applicants	❑ $ 720	❑ $ 720	❑ $ 720	❑ $ 70	❑ $ 70	❑ $ 70	
West Virginia	All Applicants	Not Available	Not Available	Not Available	Not Available	Not Available	❑ $ 470	
Wisconsin	All Applicants	❑ $ 420	❑ $ 420	❑ $ 420	❑ $ 520	❑ $ 620	❑ $ 620	
TOTAL DATA COST. Add total cost for all data requested. See Part IV (page 65) for instructions on determining the total payment due.								

Section II. Select State Ambulatory Surgery Databases (SASD)

Mark boxes for the data you are requesting. Please refer to "Description of State Ambulatory Surgery Databases (SASD)" (page 37) to make your selection. Not all HCUP data elements are available from every state.

The participating Data Organizations dictate the price of the data. Handling charges are already included and are based on the number of CD-ROMs required to hold the data. Some Data Organizations offer a price discount to AHRQ Grant recipients. If you are not sure if you qualify for this discount, please refer to Section III. AHRQ Grantee (page 64). Enter the total cost of requested data under the column titled "Total."

If you have questions or want information on other years of data or more sensitive data elements for a state, please contact the HCUP Central Distributor by phone at (866) 556-4287 (toll free), fax at (301) 628-3201, or e-mail at hcup@s-3.com.

State	HCUP SASD Price Structure	1997	1998	1999	2000	Total
Colorado	All Others	❑ $ 295	❑ $ 295	❑ $ 295	❑ $ 320	
	AHRQ Grantee (Complete Section III, page 64)	❑ $ 220	❑ $ 220	❑ $ 220	❑ $ 220	
Florida	All Applicants	❑ $ 550	❑ $ 545	❑ $ 545	❑ $ 545	
Maryland	All Applicants	❑ $ 20	❑ $ 20	❑ $ 20	❑ $ 20	
New Jersey	All Applicants	❑ $ 420	❑ $ 420	❑ $ 420	❑ $ 420	
New York	All Others	❑ $ 470	❑ $ 470	❑ $ 470	❑ $ 470	
	AHRQ Grantee (Complete Section III, page 64)	❑ $ 245	❑ $ 245	❑ $ 245	❑ $ 245	
Utah	Public, State/Federal Agency, Academic Organization	❑ $ 1,520	❑ $ 1,520	❑ $ 1,520	❑ $ 1,520	
	Private Organization	❑ $ 3,020	❑ $ 3,020	❑ $ 3,020	❑ $ 3,020	
Wisconsin	All Applicants	Not Available	❑ $ 520	❑ $ 520	❑ $ 520	
TOTAL DATA COST. Add total cost for all data requested. See Part IV (page 65) for instructions on determining the total payment due.						

Section III. AHRQ Grantee

Some states offer a discounted price for AHRQ Grant Recipients. If you are an AHRQ Grantee and intend to use the data requested for a currently funded AHRQ project, you are entitled to the discounted price and should mark your data request accordingly. Include the name of the principal investigator, title, and the corresponding grant number in the space provided below. Other types of grants are non-applicable. The Uniform State Application in no way constitutes a grant application.

The Research Grant Application Form PHS 398 is to be used in applying for AHRQ grants. This form is available online from the National Institutes of Health Web site at the following URL:

> http://www.nih.gov/grants/funding/phs398/phs398.html

Copies of the PHS 398 Grant Application Form are also available from:

> AHRQ Publications Clearinghouse
> P.O. Box 8547
> Silver Spring, MD 20907-8547
> Telephone: (800) 358-9295

If you are requesting data at the AHRQ Grantee discounted price, please provide the following information:

Name of Principal Investigator / Title: _____

AHRQ Grant Number: _____

Total Payment Due

To determine the total payment due, choose one option. Note that the HCUP Central Distributor only collects taxes from applicants in Maryland. All other applicants are responsible for determining tax liability and remitting taxes directly to state and local taxing authorities.

Option 1:   Submit the completed application (pages 58-72), without payment, to the *HCUP Central Distributor* by fax (301) 628-3201 or mail. The address is listed below. An itemized invoice will be faxed or e-mailed to you stating the total payment due, including taxes for applicants in Maryland.

Option 2:   Contact the *HCUP Central Distributor* by phone at (866) 556-4287 and specify which states and years of data you are requesting. You will be notified of the total payment due, including taxes for applicants in Maryland.

TOTAL PAYMENT DUE	
Total SID Data Cost From Section I:	$_____
Total SASD Data Cost From Section II:	$_____
Tax (MD applicants only):	$_____
Total Payment Due:	$_____

Orders will not be filled until full payment has been received.

Payment Methods

The HCUP Central Distributor accepts payment by major credit card or check.

Paying by Credit Card

Visa, MasterCard, Discover and American Express are accepted. Your credit card is not charged until the day your order is shipped. A credit card receipt for your purchase is included with the order.

Credit card information is accepted by mail or telephone. If you would like to mail the information, please complete items 1 – 10 of the Credit Card Payment form on the next page and mail it with your itemized invoice or completed application to the following address:

> *HCUP Central Distributor*
> *Social & Scientific Systems, Inc.*
> *8757 Georgia Avenue, 12th Floor*
> *Silver Spring, MD 20910*

If you prefer to provide your credit card information by telephone, please call toll-free at (866) 556-4287 between 9 a.m. and 5 p.m. Eastern Time.

Paying by Check

Checks should be made payable to *Social & Scientific Systems,Inc.* Mail a check for the total payment due with your itemized invoice or completed application. The address is listed above.

Credit Card Payment Form

If you would like to pay by credit card, please complete items 1 – 10 of this form and enclose it with your application. If you prefer to provide your credit card information by telephone, please call toll-free at (866) 556-4287 between 9 a.m. and 5 p.m. Eastern Time.

1. Date: _____

2. Individual/Company Name: _____

3. Names On Credit Card: _____

Please list the names on the credit card exactly as they are shown on the card.

_____

_____

4. Type Of Credit Card: **MASTERCARD   VISA   DISCOVER   AMERICAN EXPRESS**

5. Amount: _____

6. Credit Card Number: _____

7. Expiration Date: _____

8. Credit Card Billing Address: _____

_____

9. City, State & Zip Code: _____

10. Customer Signature: _____

<u>For Office Use Only</u>

Verbal Authorization For Signature: *Yes*   *No*

Person Requesting Credit Card Processing: _____

Requestor's Phone Number And Extension: _____

Project Code Number: _____

Date Processed: _____   *Invoice Numbers Paid:* _____

Project Code: _____

Input By: _____

Recipient shall indemnify and hold The MEDSTAT Group, Inc. and its directors, officers, employees, agents, affiliates and subsidiaries harmless from any and all losses, claims, damages, liabilities, costs and expenses (including, without limitation, reasonable attorney's fees and costs) arising out of any claim arising from any third parties, including but not limited to any or some combination of the several States comprising the United States of America and/or the Government of the United States of America, concerning Recipient's use of SID or SASD data provided by The MEDSTAT Group, Inc. Further, Recipient agrees that The MEDSTAT Group, Inc. shall not be liable to Recipient for any reason whatsoever arising out of the SID or SASD data or the Recipient's use of the SID or SASD data.

Recipient certifies and warrants that it has made no representations to The MEDSTAT Group, Inc. concerning any uses it (Recipient) intends to make of the SID or SASD data provided by The MEDSTAT Group, Inc. under the terms and conditions of The MEDSTAT Group, Inc. contract with the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality. Further, Recipient agrees that no representation of Recipient as to the Recipient's intended use of the SID or SASD data was used to determine whether the Recipient's request to use SID or SASD data would be approved.

Recipient shall indemnify and hold Social & Scientific Systems, Inc. (SSS) and its directors, officers, employees, owners, and agents harmless from any and all losses, claims, damages, liabilities, costs and expenses (including, without limitation, reasonable attorney's fees and costs) arising out of any claim arising from any third parties, including but not limited to any or some combination of the several States comprising the United States of America and/or the Government of the United States of America, concerning Recipient's use of SID or SASD data provided by SSS. Further, Recipient agrees that SSS shall not be liable to Recipient for any reason whatsoever arising out of the SID or SASD data or the Recipient's use of the SID or SASD data.

Recipient certifies and warrants that it has made no representations to SSS concerning any uses it (Recipient) intends to make of the SID or SASD data provided by SSS under the terms and conditions of its contract with the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality. Further, Recipient agrees that no representation of Recipient as to the Recipient's intended use of the SID or SASD data was used to determine whether the Recipient's request to use SID or SASD data would be approved.

Signed: _____ Date: _____

Part VI: Data Use Agreement for HCUP State Inpatient Databases

This agreement must be signed by anyone seeking to use data in the State Inpatient Databases (SID) maintained by the Center for Organization and Delivery Studies (CODS), Agency for Healthcare Research and Quality (AHRQ) before access to such data can be granted. All data maintained by CODS/AHRQ is confidential or proprietary except data specified for restricted access public release, or data authorized by AHRQ and the original data source for re-release.

Under section 924(c) of the Public Health Service Act (42 U.S.C. 299c-3(c)), data that identifies individuals or establishments collected by the Agency for Healthcare Research and Quality (AHRQ) may be used only for the purpose for which they were collected. Data supplied to AHRQ under the auspices of HCUP were provided by the data sources only for research, analysis, and aggregate statistical reporting.

No identification of persons--Any effort to determine the identity of any person contained in the databases (including but not limited to patients, physicians, and other health care providers) or to use the information for any purpose other than for research, analysis, and aggregate statistical reporting would violate the conditions of this data use agreement and therefore the above-referenced AHRQ confidentiality statute. Furthermore, under the statute, no identifying information may be published or released in any way without the consent of the person who supplied the information or who can be identified by the information. AHRQ omits from the data set all direct personal identifiers, as well as characteristics that might lead to identification of persons. It may be possible in rare instances, through complex analysis and with outside information, to ascertain from the data sets the identity of particular persons. Considerable harm could ensue if this were done. By virtue of this agreement, the undersigned agrees that such attempts will be prohibited and that information which could identify individuals directly or by inference will not be released or published. Because of these restrictions, users of the data must agree that they will not attempt to contact individuals for the purpose of verifying information supplied in the HCUP databases. Any questions about the data must be referred to AHRQ only.

Use of establishment identifiers--Section 924(c) of the Public Health Service Act (42 U.S.C. 299c-3(c)) also restricts the use of any information that allows the identification of establishments to the purpose for which the information was collected. Permission was obtained from the data sources (state data organizations, hospital associations, and data consortia) to use the identification of hospitals (when such identification appears in the data sets) for the purpose of conducting research only. Such research purpose includes linking institutional information from outside data sets for analysis and aggregate statistical reporting. Such purpose does *not* include the use of information in the data sets concerning individual establishments for commercial or competitive purposes involving those individual establishments, or to determine the rights, benefits, or privileges of establishments. Users of the data must not identify establishments directly or by inference in disseminated material. In addition, users of the data must not contact establishments for the purpose of verifying information supplied in the HCUP databases. Any questions about the data must be referred to AHRQ only.

The undersigned gives the following assurances with respect to the AHRQ data sets.

- I will not use nor permit others to use the data in these sets in any way except for research, analysis, and aggregate statistical reporting;

- I will require others in the organization (specified below) who use the data to sign this agreement (specifically acknowledging their agreement to abide by its terms) and will submit those signed agreements to AHRQ;

- I will ensure that the data are kept in a secured environment and that only authorized users have access to the data;

- I will not release nor permit others to release any information that identifies persons, directly or indirectly. I will not release information where the number of observations (i.e., discharge records) in any given cell of tabulated data is less than or equal to 10;

- I will not release nor permit others to release the data sets or any part of them to any person who is not a member of the organization (specified below), except with the approval of AHRQ;

- I will not attempt to link nor permit others to attempt to link the hospital stay records of persons in this data set with personally identifiable records from any other source;

Data Use Agreement for HCUP State Inpatient Databases (continued)

- I will not attempt to use nor permit others to use the datasets to learn the identity of any person included in any set;

- I will not use nor permit others to use the data concerning individual establishments (1) for commercial or competitive purposes involving those individual establishments, (2) to determine the rights, benefits, or privileges of individual establishments nor (3) to report, through any medium, data that could identify, directly or by inference, individual establishments;

- When the identities of establishments are not provided on the data sets, I will not attempt to use nor permit others to use the data sets to learn the identity of any establishment in the data sets;

- I will not contact nor permit others to contact establishments or persons in the data sets to question, verify, or discuss data in the HCUP databases;

- I will indemnify, defend, and hold harmless the data sources and AHRQ from any or all claims and losses accruing to any person, organization, or other legal entity as a result of violation of this agreement. This provision applies only to the extent permitted by federal law and regulation (i.e., to the extent permitted by 31 United States Code Section 1341 (Subtitle II, Chapter 13, Subchapter III, "Limitations on Expending and Obligating Amounts."));

- I will make no statement nor permit others to make statements indicating or suggesting that interpretations drawn are those of data sources or AHRQ;

- I will provide an abstract and reference for any published research material resulting from the use of these HCUP State Inpatient Databases to the HCUP Central Distributor; and

- I will acknowledge in all reports based on these data that the source of the data is the specific state(s) or data organization(s) that submitted data to the HCUP (e.g., "Healthcare Cost and Utilization Project (HCUP), *state name(s)* State Inpatient Databases (SID), Agency for Healthcare Research and Quality").

I understand that these assurances are collected for the United States Agency for Healthcare Research and Quality to require compliance with its statutory confidentiality requirement. My signature indicates my agreement to comply with the above-stated requirements with the knowledge that any violation of this statute is subject to a civil penalty of up to $10,000 under 42 U.S.C. 299c-3(d), and that deliberately making a false statement about this or any matter within the jurisdiction of any department or agency of the Federal Government violates 18 U.S.C. 1001 and is punishable by a fine of up to $10,000 or up to five years in prison. Violators of this agreement may also be subject to penalties under state confidentiality statutes that apply to these data for particular states

Signed: _____   Date: _____

Print or Type Name: _____

Title: _____

Organization: _____

Address: _____

City: _____   State: _____   Zip Code: _____

Phone Number: _____   Fax: _____   E-mail: _____

Note to Purchaser: Shipment of the data product will only be made to the person who signs this data use agreement.

Part VII: Data Use Agreement for HCUP State Ambulatory Surgery Databases

This agreement must be signed by anyone seeking to use data in the State Ambulatory Surgery Databases (SASD) maintained by the Center for Organization and Delivery Studies (CODS), Agency for Healthcare Research and Quality (AHRQ) before access to such data can be granted. All data maintained by CODS/AHRQ is confidential or proprietary except data specified for restricted access public release, or data authorized by AHRQ and the original data source for re-release.

Under section 924(c) of the Public Health Service Act (42 U.S.C. 299c-3(c)), data that identifies individuals or establishments collected by the Agency for Healthcare Research and Quality (AHRQ) may be used only for the purpose for which they were collected. Data supplied to AHRQ under the auspices of HCUP were provided by the data sources only for research, analysis, and aggregate statistical reporting.

No identification of persons--Any effort to determine the identity of any person contained in the databases (including but not limited to patients, physicians, and other health care providers) or to use the information for any purpose other than for research, analysis, and aggregate statistical reporting would violate the conditions of this data use agreement and therefore the above-referenced AHRQ confidentiality statute. Furthermore, under the statute, no identifying information may be published or released in any way without the consent of the person who supplied the information or who can be identified by the information. AHRQ omits from the data set all direct personal identifiers, as well as characteristics that might lead to identification of persons. It may be possible in rare instances, through complex analysis and with outside information, to ascertain from the data sets the identity of particular persons. Considerable harm could ensue if this were done. By virtue of this agreement, the undersigned agrees that such attempts will be prohibited and that information which could identify individuals directly or by inference will not be released or published. Because of these restrictions, users of the data must agree that they will not attempt to contact individuals for the purpose of verifying information supplied in the HCUP databases. Any questions about the data must be referred to AHRQ only.

Use of Establishment identifiers--Section 924(c) of the Public Health Service Act (42 U.S.C. 299c-3(c)) also restricts the use of any information that allows the identification of establishments to the purpose for which the information was collected. Permission was obtained from the data sources (state data organizations, hospital associations, and data consortia) to use the identification of hospitals (when such identification appears in the data sets) for the purpose of conducting research only. Such research purpose includes linking institutional information from outside data sets for analysis and aggregate statistical reporting. Such purpose does *not* include the use of information in the data sets concerning individual establishments for commercial or competitive purposes involving those individual establishments, or to determine the rights, benefits, or privileges of establishments. Users of the data must not identify establishments directly or by inference in disseminated material. In addition, users of the data must not contact establishments for the purpose of verifying information supplied in the HCUP databases. Any questions about the data must be referred to AHRQ only.

The undersigned gives the following assurances with respect to the AHRQ data sets.

- I will not use nor permit others to use the data in these sets in any way except for research, analysis, and aggregate statistical reporting;

- I will require others in the organization (specified below) who use the data to sign this agreement (specifically acknowledging their agreement to abide by its terms) and will submit those signed agreements to AHRQ;

- I will ensure that the data are kept in a secured environment and that only authorized users have access to the data;

- I will not release nor permit others to release any information that identifies persons, directly or indirectly;

- I will not release nor permit others to release the data sets or any part of them to any person who is not a member of the organization (specified below), except with the approval of AHRQ;

- I will not attempt to link nor permit others to attempt to link the hospital stay records of persons in this data set with personally identifiable records from any other source;

Data Use Agreement for HCUP State Ambulatory Surgery Databases (continued)

▪ I will not attempt to use nor permit others to use the data sets to learn the identity of any person included in any set;

▪ I will not use nor permit others to use the data concerning individual establishments (1) for commercial or competitive purposes involving those individual establishments, (2) to determine the rights, benefits, or privileges of individual establishments nor (3) to report, through any medium, data that could identify, directly or by inference, individual establishments;

▪ When the identities of establishments are not provided on the data sets, I will not attempt to use nor permit others to use the data sets to learn the identity of any establishment in the data sets;

▪ I will not contact nor permit others to contact establishments or persons in the data sets to question, verify, or discuss data in the HCUP databases;

▪ I will indemnify, defend, and hold harmless the data sources and AHRQ from any or all claims and losses accruing to any person, organization, or other legal entity as a result of violation of this agreement. This provision applies only to the extent permitted by federal law and regulation (i.e., to the extent permitted by 31 United States Code Section 1341 (Subtitle II, Chapter 13, Subchapter III, "Limitations on Expending and Obligating Amounts."));

▪ I will make no statement nor permit others to make statements indicating or suggesting that interpretations drawn are those of data sources or AHRQ;

▪ I will provide an abstract and reference for any published research material resulting from the use of these HCUP State Ambulatory Surgery Databases to the HCUP Central Distributor; and

▪ I will acknowledge in all reports based on these data that the source of the data is the specific state(s) or data organization(s) that submitted data to the HCUP (e.g., "Healthcare Cost and Utilization Project (HCUP), *state name(s)* State Ambulatory Surgery Databases (SASD), Agency for Healthcare Research and Quality").

I understand that these assurances are collected for the United States Agency for Healthcare Research and Quality to require compliance with its statutory confidentiality requirement. My signature indicates my agreement to comply with the above-stated requirements with the knowledge that any violation of this statute is subject to a civil penalty of up to $10,000 under 42 U.S.C. 299c-3(d), and that deliberately making a false statement about this or any matter within the jurisdiction of any department or agency of the Federal Government violates 18 U.S.C. 1001 and is punishable by a fine of up to $10,000 or up to five years in prison. Violators of this agreement may also be subject to penalties under state confidentiality statutes that apply to these data for particular states.

Signed: _____   Date: _____

Print or Type Name: _____

Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax: _____ E-mail: _____

Note to Purchaser: Shipment of the data product will only be made to the person who signs this data use agreement.

Final Checklist:

✓ *Have you completed Part I through Part III of the application (pages 58-64)?*

✓ *Have you supplied the necessary information to get the discounted price from some states for AHRQ Grantees (page 64)?*

✓ *Have you exercised option 1 or 2 in terms of total payment (page 65)?*

✓ *If paying by check, have you enclosed a check payable to **Social & Scientific Systems, Inc** for the full amount due (page 65)?*

✓ *If paying by credit card, have you completed and signed the credit card payment form (page 66)?*

✓ *Have you read and signed the Indemnification Clause (page 67)?*

✓ *If purchasing the SID, have you read and signed the "Data Use Agreement for HCUP State Inpatient Databases" (pages 68-69)?*

✓ *If purchasing the SASD, have you read and signed the "Data Use Agreement for HCUP State Ambulatory Surgery Databases" (pages 70-71)?*

✓ *Submit your application (pages 58-72) by fax or mail to the HCUP Central Distributor, SSS, Inc. Contact information is listed on page 57.*

For Internal Use Only:

Date Received:_____   DUA Signed/Dated:_____   Order Number:_____

Application Complete:_____   Payment Received:_____   Date Shipped: _____